07/13/2007 18:18

Image# 27930914599

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

| FURIM                     | 3X  | For Ot                                 | her Than An                             | Authorize            | d Commit                        | tee             |              | Office Use     | e Only                             |   |
|---------------------------|---|--|---|----------------------|---------------------------------|-----------------|--------------|----------------|------------------------------------|---|
| 1. NAME C                 | OF<br>TTEE (in full)  |  | EC MAILING LAB<br>PE OR PRINT           |                      | ample:If typing<br>er the lines | g, type         |              |                |                                    |   |
| BORDE                     | R HEALTH FEDE   | ERAL PAC                               |   | 1 1 1 1              |                                 | 1 1 1 1         |              | 1 1 1 1        | 1 1 1                              |   |
|                           |   | 1 1 1 1                                |   |                      | 1 1 1 1                         | 1 1 1 1         |              |                |                                    |   |
| ADDRESS (m                | umber and street)   | 1210                                   | W EXPRESSW                              | AY 83 SUITE          | 10                              |                 |              |                |                                    |   |
| tha                       | eck if different<br>n previously<br>orted. (ACC)  | PHA                                    | RR                                      |                      |                                 |                 | LTX L        | 78             | 577                                |   |
| 2. FEC IDE                | ENTIFICATION N  | UMBER                                  | <b>—</b>                                | CITY 🛕               |                                 |                 | STATE        | Ž              | ZIPCODE                            | A   |
| CC                        | 00415752  |  | ;                                       | 3. IS THIS<br>REPORT |                                 | NEW (N) OR      |              | AMENDED<br>(A) |                                    |   |
| (Choose                   | April 15 Quarterly Reports:  April 15 Quarterly Repor July 15 Quarterly Repor October 15 Quarterly Repor January 31 Quarterly Repor July 31 Mid-Yea Report(Non-elec Year Only) (MY) Termination Rep (TER) | t(Q1)<br>t(Q2)<br>t(Q3)<br>t(YE)<br>ur | (d) 30-Day  Post -Electi Report for the | election on          |                                 | (12C)           | Gene Spec    | ff (30R)       | ye De (Ne Ye Ja Ja In the State of | ov 20 (M11) on-Election ar Only) oc 20 (M12) on-Election ar Only) n 31 (YE) unoff (12R) |
| 5. Covering               | g Period  | 0 4                                    | 01 200                                  | 7                    | through                         | 0 6             | 30           | 2007           |                                    |   |
| •                         | have examined the Name of Treasur   |  | nd to the best of m<br>ie Perez         | ny knowledge         | and belief it is                | s true, correct | and compl    | ete.           |                                    |   |
| Signature of <sup>-</sup> | Treasurer Ele <u>c</u>  | tronically Fil                         | led by Ernie Pe                         | rez                  |                                 |                 | Date         | 07 13          | 20                                 | 07  |
| NOTE : Subr               | mission of false, e   | rroneous, or                           | incomplete inforr                       | nation may su        | ubject the pers                 | son signing th  | is Report to | the penalties  | of 2 U.S.C                         | 437g.   |
|                           | fice<br>se  |  |   |                      |                                 |                 |              |                | FORM (                             | 3X  |

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name BORDER HEALTH FEDERAL PAC <sup>®</sup> D " D 0 4 0 1 2007 0.6 3 0 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 388383.00 <sup>°</sup>2007 January 1 (b) Cash on Hand at 469505.05 Begining of Reporting Period ..... 79870.23 160992.28 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 549375.28 549375.28 6(a) and 6(c) for Column B) ..... 0.00 0.00 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 549375.28 549375.28 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission

999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

BORDER HEALTH FEDERAL PAC

0 1 3<sup>D</sup>0 м м 0 4 м м 0 6 2007 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 79550.04 156988.51 (i) Itemized (use Schedule A) .......... 320.19 4003.77 (ii) Unitemized ..... (iii) TOTAL (add 79870.23 160992.28 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 79870.23 160992.28 Totals to Line 33, page 5) ...... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 79870.23 160992.28 12, 13, 14, 15, 16, 17, and 18(c)) .....

79870.23

160992.28

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

U. DISPURSEMENTS COLUMN A COLUMN B

| II. DISBURSEMENTS   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:   | Total Tillo Feriod            | Gueriau Fear to Bate              |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)  | 0.00                          | 0.00                              |
| (i) Federal Share   | 0.00                          | 0.00                              |
| (1) N 5 1 101   | 0.00                          | 0.00                              |
| (ii) Non-Federal Share(b) Other Federal Operating   | 0.00                          | 0.00                              |
| Expenditures  | 0.00                          | 0.00                              |
| (c) Total Operating Expenditures  | 0.00                          | 0.00                              |
| (add 21(a)(i), (a)(ii) and (b))   | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party  Committees   | 0.00                          | 0.00                              |
| 23. Contributions to  |                               |                                   |
| Federal Candidates/Committeesand Other Political Committees   | 0.00                          | 0.00                              |
| 24. Independent Expenditure   | 0.00                          | 0.00                              |
| (use Schedule E)  | 0.00                          | 0.00                              |
| Committees (2 U.S.C. 441a(d))<br>(use Schedule F)   | 0.00                          | 0.00                              |
| (use scriedule F)   |                               |                                   |
| 26. Loan Repayments Made  | 0.00                          | 0.00                              |
| NT 1  | 0.00                          | 0.00                              |
| 27. Loans Made  | 0.00                          | 0.00                              |
| (a) Individuals/Persons Other Than Political Committees   | 0.00                          | 0.00                              |
| man i olitical committees   |                               |                                   |
| (b) Political Party Committees  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs)   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds  |                               |                                   |
| (add Lines 28(a), (b), and (c))   | 0.00                          | 0.00                              |
| 29. Other Disbursements   | 0.00                          | 0.00                              |
| PO Fodoral Floation Activity (211 S.C. 421/20)  |                               |                                   |
| <ol> <li>Federal Election Activity (2 U.S.C 431(20))</li> <li>(a) Shared Federal Election Activity</li> </ol> |                               |                                   |
| (from Schedule H6)  |                               |                                   |
| (i) Federal Share   | 0.00                          | 0.00                              |
| (ii) "Levin" Share  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely   |                               |                                   |
| With Federal Funds  | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add  | 0.00                          | 0.00                              |
| Lines 30(a)(i), 30(a)(ii) and 30(b))  | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22,   |                               |                                   |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c))  | 0.00                          | 0.00                              |
| , , -, -, , -, -, -, -, -, -, -, -, -, -  |                               |                                   |
| 32. Total Federal Disbursements   |                               |                                   |
| (subtract Line 21(a)(ii) from Line 30(a)(ii)  | 0.00                          | 0.00                              |
| from Line 31)   | 0.00                          | 0.00                              |

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating<br>Expenditures                            | COLUMN A Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|----------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3)         | 79870.23                   | 160992.28                         |
| 34. Total Contribution Refunds (from Line 28(d))                            | 0.00                       | 0.00                              |
| 85. Net Contributions (other than loans) (subtract Line 34 from Line 33)    | 79870.23                   | 160992.28                         |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00                       | 0.00                              |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)                | 0.00                       | 0.00                              |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36)              | 0.00                       | 0.00                              |

| SCHEDULE A (FEC Form 3X)                     |  |   | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 6 / 123               |
|--|--|---|-------------------------------------|---|
|  | EMIZED RECEIPTS  |   | or each category of the             | (check only one)                            |
| TI EIMIZED TIEGEII 10                        |  |   | Detailed Summary Page               | X 11a 11b 11c 12                            |
| Δ.   | y information copied from such Reports and S               | totomonto mo                                      | , not be cold or used by any nore   | 13 14 15 16 17                              |
| or   | for commercial purposes, other than using the              | name and add                                      | dress of any political committee to | osolicit contributions from such committee. |
|  | NAME OF COMMITTEE (In Full)                                |   |                                     |   |
|  | BORDER HEALTH FEDERAL PAC                                  |   |                                     |   |
| A.   | Full Name (Last, First, Middle Initial) Charity Abreu      |   |                                     | Date of Receipt                             |
|  | Mailing Address 1619 hertiage lane                         |   |                                     | 04 12 2007                                  |
|  | City   | State   | Zip Code                            | Transaction ID: SA11A1.6309                 |
|  | mission  | TX  | 78572                               | Amount of Each Receipt this Period          |
|  | FEC ID number of contributing federal political committee. | C   |                                     | 250.00                                      |
|  | Name of Employer self-employee                             | Occupation physician                              |                                     | contribution                                |
|  | Receipt For:   | <del>, , , , , , , , , , , , , , , , , , , </del> | Year-to-Date ▼                      |   |
|  | Primary General  | 00 0  |                                     | 7   |
|  | Other (specify) ▼  | 0 0   | 1000.00                             |   |
| <u> </u>                                     | Full Name (Last, First, Middle Initial)<br>Charity Abreu   |   |                                     | Date of Receipt                             |
|  | Mailing Address 1619 hertiage lane                         |   |                                     | 05 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
|  | City   | State   | Zip Code                            | Transaction ID: SA11A1.6434                 |
|  | mission  | TX  | 78572                               | Amount of Each Receipt this Period          |
|  | FEC ID number of contributing federal political committee. | C   |                                     | 250.00                                      |
|  | Name of Employer self-employee                             | Occupation physician                              |                                     | contribution                                |
|  | Receipt For:   |   | Year-to-Date ▼                      |   |
|  | Primary General  | 00 0  |                                     | 7   |
|  | Other (specify) ▼  | 0 0   | 1250.00                             |   |
| C.   | Full Name (Last, First, Middle Initial)<br>Charity Abreu   |   |                                     | Date of Receipt                             |
|  | Mailing Address 1619 hertiage lane                         |   |                                     | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
|  | City   | State   | Zip Code                            | Transaction ID: SA11A1.6559                 |
|  | mission  | TX  | 78572                               | Amount of Each Receipt this Period          |
|  | FEC ID number of contributing federal political committee. | C   |                                     | 250.00                                      |
| Name of Employer self-employee  Receipt For: |  | Occupation physician                              |                                     | contribution                                |
|  |  |   | e Year-to-Date ▼                    |   |
|  | Primary General  |   | 1500.00                             | 7   |
|  | Other (specify) ▼  |   | 1300.00                             |   |
| s  | UBTOTAL of Receipts This Page (optional)                   |   |                                     | 750.00                                      |
| $\vdash$                                     |  |   | •                                   |   |
| T  | OTAL This Period (last page this line number               | only)   |                                     |   |

| SCHEDULE A (FEC Form 3X)           |  |                         | Llea coparata cabadula(s)           | FOR LINE NUMBER: PAGE 7 / 123                     |  |  |
|------------------------------------|--|-------------------------|-------------------------------------|---|--|--|
| ITEMIZED RECEIPTS                  |  | 2 Separate soriedate(s) |                                     | (check only one)                                  |  |  |
| TI EIMIZED TIEGEII TO              |  |                         | Detailed Summary Page               | X   11a   11b   11c   12   13   14   15   16   17 |  |  |
| ۸r                                 | y information copied from such Reports and S               | tatamente may           | y not be cold or used by any nore:  |   |  |  |
| or                                 | for commercial purposes, other than using the              | name and add            | dress of any political committee to | osolicit contributions from such committee.       |  |  |
| $\setminus$                        | NAME OF COMMITTEE (In Full)                                |                         |                                     |   |  |  |
|                                    | BORDER HEALTH FEDERAL PAC                                  |                         |                                     |   |  |  |
| A.                                 | Full Name (Last, First, Middle Initial) Ruben Abreu        |                         |                                     | Date of Receipt                                   |  |  |
|                                    | Mailing Address 104 augusta square                         |                         |                                     | 04 12 2007  |  |  |
|                                    | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6310                       |  |  |
|                                    | mcallen  | TX                      | 78503                               | Amount of Each Receipt this Period                |  |  |
|                                    | FEC ID number of contributing federal political committee. | C                       |                                     | 250.00  |  |  |
|                                    | Name of Employer self-employee                             | Occupation              |                                     | contribution                                      |  |  |
|                                    | Receipt For:   |                         | Year-to-Date ▼                      |   |  |  |
|                                    | Primary General  |                         | 1000.00                             | 7   |  |  |
|                                    | Other (specify) ▼  | 0 0                     | 1000.00                             |   |  |  |
| В.                                 | Full Name (Last, First, Middle Initial)<br>Ruben Abreu     |                         |                                     | Date of Receipt                                   |  |  |
|                                    | Mailing Address 104 augusta square                         |                         |                                     | 05 11 2007  |  |  |
|                                    | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6435                       |  |  |
|                                    | mcallen  | TX                      | 78503                               | Amount of Each Receipt this Period                |  |  |
|                                    | FEC ID number of contributing federal political committee. | C                       |                                     | 250.00  |  |  |
|                                    | Name of Employer self-employee                             | Occupation physician    |                                     | contribution                                      |  |  |
|                                    | Receipt For:   |                         | Year-to-Date ▼                      |   |  |  |
|                                    | Primary General  | 1 99 19                 |                                     | 7   |  |  |
|                                    | Other (specify) ▼  |                         | 1250.00                             |   |  |  |
| C.                                 | Full Name (Last, First, Middle Initial)<br>Ruben Abreu     |                         |                                     | Date of Receipt                                   |  |  |
| Mailing Address 104 augusta square |  |                         |                                     | 0 6 1 5 2 0 0 7                                   |  |  |
|                                    | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6560                       |  |  |
|                                    | mcallen  | TX                      | 78503                               | Amount of Each Receipt this Period                |  |  |
|                                    | FEC ID number of contributing federal political committee. | C                       |                                     | 250.00  |  |  |
|                                    | Name of Employer self-employee                             | Occupation physician    |                                     | contribution                                      |  |  |
| Receipt For:                       |  | Aggregate               | Year-to-Date ▼                      |   |  |  |
|                                    | Primary General  |                         | 1500.00                             | 1   |  |  |
| _                                  | Other (specify) ▼  |                         |                                     |   |  |  |
| s                                  | UBTOTAL of Receipts This Page (optional)                   |                         |                                     | 750.00  |  |  |
| $\vdash$                           |  |                         |                                     |   |  |  |
| T                                  | OTAL This Period (last page this line number               | only)                   |                                     |   |  |  |

| SCHEDULE A (FEC Form 3X)                                     |  |                                     | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 8 / 123              |        |  |
|--|--|-------------------------------------|-------------------------------------|--|--------|--|
| ITEMIZED RECEIPTS  |  |                                     | or each category of the             | (check only one)                           |        |  |
| THE MILES THE GETT TO  |  |                                     | Detailed Summary Page               | X 11a 11b 11c 12<br>13 14 15 16            | 47     |  |
| ۸۰   | w information conicd from such Deports and St  | , not be cold or used by any person |                                     | 17   |        |  |
| or   | y information copied from such Reports and St<br>for commercial purposes, other than using the | name and add                        | dress of any political committee to | solicit contributions from such committee. |        |  |
| $\setminus$  | NAME OF COMMITTEE (In Full)  |                                     |                                     |  |        |  |
| $ \rangle$   | BORDER HEALTH FEDERAL PAC  |                                     |                                     |  |        |  |
|  | Full Name (Last, First, Middle Initial)  |                                     |                                     |  |        |  |
| A.   | Michael Alleyn   |                                     |                                     | Date of Receipt                            |        |  |
|  | Mailing Address 5505 N. 4th  |                                     |                                     | 04 12 2007                                 |        |  |
|  | City   | State                               | Zip Code                            | Transaction ID: SA11A1.6311                |        |  |
|  | mcallen  | TX                                  | 78501                               | Amount of Each Receipt this Period         |        |  |
|  | FEC ID number of contributing  |                                     |                                     |  | $\neg$ |  |
|  | federal political committee.   | C                                   |                                     | 250.00                                     |        |  |
|  | Name of Employer   | Occupation                          | n                                   | contribution                               |        |  |
|  | self-employed  | private in                          |                                     |  |        |  |
|  | Receipt For:   |                                     | e Year-to-Date ▼                    | 7  |        |  |
|  | Primary General  |                                     | 1000.00                             | 1  |        |  |
|  | Other (specify) ▼  |                                     | 1000.00                             |  |        |  |
| _  |  |                                     |                                     |  |        |  |
| В.   | Full Name (Last, First, Middle Initial) Michael Alleyn   |                                     |                                     | Date of Receipt                            |        |  |
|  | Mailing Address 5505 N. 4th  |                                     |                                     | M M / D D / Y Y Y Y                        |        |  |
|  |  |                                     |                                     | 05 11 2007                                 |        |  |
|  | City   | State                               | Zip Code                            | Transaction ID: SA11A1.6436                |        |  |
|  | mcallen TX   |                                     | 78501                               | Amount of Each Receipt this Period         |        |  |
|  | FEC ID number of contributing  | C                                   |                                     | 250.00                                     |        |  |
|  | federal political committee.   |                                     |                                     |  | _      |  |
|  | Name of Employer self-employed   | Occupation                          | n                                   | contribution                               |        |  |
|  |  | private in                          |                                     | _  |        |  |
|  | Receipt For: Primary General   | Aggregate                           | e Year-to-Date ▼                    |  |        |  |
|  | Other (specify)  | ' '                                 | 1250.00                             |  |        |  |
|  |  | 0 0                                 | 0 0 0 0 0 0                         |  |        |  |
|  | Full Name (Last, First, Middle Initial)  |                                     |                                     |  |        |  |
| C.   | Michael Alleyn   |                                     |                                     | Date of Receipt                            |        |  |
|  | Mailing Address 5505 N. 4th  |                                     |                                     | 06 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |        |  |
|  | City   |                                     | Zip Code                            | Transaction ID: SA11A1.6561                |        |  |
|  | <u>mcallen</u>   | TX                                  | 78501                               | Amount of Each Receipt this Period         |        |  |
|  | FEC ID number of contributing  |                                     | 1 1 1 1 1                           | 250.00                                     | П      |  |
| federal political committee.  Name of Employer self-employed |  | C                                   |                                     | 250.00                                     |        |  |
|  |  | Occupation                          | <br>n                               | contribution                               |        |  |
|  |  | private in                          |                                     |  |        |  |
|  |  |                                     | e Year-to-Date ▼                    | 7  |        |  |
| Primary General Other (specify) ▼                            |  |                                     | 1500.00                             |  |        |  |
|  |  |                                     | 1300.00                             |  |        |  |
|  |  |                                     |                                     |  | _      |  |
| ٩  | UBTOTAL of Receipts This Page (optional)   |                                     |                                     | 750.00                                     |        |  |
| $\vdash$   | ODITINE OF HEGERALS THIS Fage (Optional)   |                                     |                                     |  | Ŧ.     |  |
| T  | OTAL This Period (last page this line number of  | only)                               |                                     |  |        |  |

| SCHEDULE A (FEC Form 3X)                     |   |              | Use separate schedule(s)            | FOR LINE NUMBER:                   | PAGE 9 / 123             |  |
|--|---|--------------|-------------------------------------|------------------------------------|--------------------------|--|
| ITEMIZED RECEIPTS                            |   |              | or each category of the             | (check only one)                   | <b>7</b>                 |  |
| THE MILES THE GETT TO                        |   |              | Detailed Summary Page               | X 11a 11b 1                        | 11c   12<br>15   16   17 |  |
| Δ.   | winformation against from such Departs and St   | otomonto mo  | reat he hald ar used by any person  |                                    |                          |  |
| or   | y information copied from such Reports and St for commercial purposes, other than using the | name and add | dress of any political committee to | solicit contributions from         | such committee.          |  |
| $\setminus$                                  | NAME OF COMMITTEE (In Full)   |              |                                     |                                    |                          |  |
| $ \rangle$                                   | BORDER HEALTH FEDERAL PAC   |              |                                     |                                    |                          |  |
| _  | Full Name (Last, First, Middle Initial)   |              |                                     |                                    |                          |  |
| A.   | Michael Amyx  |              |                                     | Date of Receipt                    |                          |  |
|  | Mailing Address 2108 Mynah  |              |                                     | M M / D D D D 1 2                  |                          |  |
|  | City  | State        | Zip Code                            | Transaction ID: S                  |                          |  |
|  | mcallen   | TX           | 78501                               | Amount of Each Re                  |                          |  |
|  | FEC ID number of contributing   |              | 70001                               | Amount of Laciffic                 | <del> </del>             |  |
|  | federal political committee.  | C            |                                     |                                    | 250.00                   |  |
|  | Name of Employer  | Occupation   | <br>n                               | contribution                       |                          |  |
|  | self-employed   | private in   | vestor                              |                                    |                          |  |
|  | Receipt For:  | Aggregate    | e Year-to-Date ▼                    |                                    |                          |  |
|  | Primary General   |              | 1000.00                             | 1                                  |                          |  |
|  | Other (specify) ▼   |              | 1000.00                             | J                                  |                          |  |
| _  | Full Name (Last, First, Middle Initial)   |              |                                     |                                    |                          |  |
| В.   |   |              |                                     | Date of Receipt                    |                          |  |
|  | Mailing Address 2108 Mynah  |              |                                     | 05 11                              |                          |  |
|  | City  | State        | Zip Code                            | Transaction ID: SA11A1.6438        |                          |  |
|  | mcallen TX  |              | 78501                               | Amount of Each Receipt this Period |                          |  |
|  | FEC ID number of contributing   | С            |                                     |                                    | 250.00                   |  |
|  | federal political committee.  |              |                                     |                                    | 200.00                   |  |
|  | Name of Employer self-employed  | Occupation   | n                                   | contribution                       |                          |  |
|  | self-employed *   | private in   |                                     |                                    |                          |  |
|  | Receipt For:  | Aggregate    | e Year-to-Date ▼                    |                                    |                          |  |
|  | Primary General   |              | 1250.00                             | 1                                  |                          |  |
|  | Other (specify) ▼   | 0 0          | 12000                               | J                                  |                          |  |
| <u>С.</u>                                    | Full Name (Last, First, Middle Initial) Michael Amyx  |              |                                     | Date of Receipt                    |                          |  |
| Ο.   | Mailing Address 2108 Mynah  |              |                                     | M M / D D                          | / <b>Y Y Y Y Y</b>       |  |
|  |   |              |                                     | 0 6 1 5                            |                          |  |
|  | City  | State        | Zip Code                            | Transaction ID: S                  | A11A1.6562               |  |
|  | mcallen   | TX           | 78501                               | Amount of Each Re                  | eceipt this Period       |  |
|  | FEC ID number of contributing   | C            |                                     |                                    | 250.00                   |  |
|  | federal political committee.  |              |                                     |                                    |                          |  |
| Name of Employer self-employed  Receipt For: |   | Occupation   | n                                   | contribution                       |                          |  |
|  |   | private in   | vestor                              |                                    |                          |  |
|  |   | Aggregate    | e Year-to-Date ▼                    |                                    |                          |  |
| Primary General                              |   |              | 1500.00                             |                                    |                          |  |
|  | Other (specify) ▼   |              |                                     | J                                  |                          |  |
|  |   |              |                                     |                                    | 750.00                   |  |
| S  | UBTOTAL of Receipts This Page (optional)  |              | 190.00                              |                                    |                          |  |
|  |   |              |                                     |                                    |                          |  |
| ΙT   | OTAL This Period (last page this line number of   | only)        | <b>.</b>                            |                                    |                          |  |

| S                                    | CHEDULE A (FEC Form 3X)  | Use separate schedule(s)  | FOR LINE NUMBER: PAGE 10 / 123  |
|--------------------------------------|--|---|---|
| ITEMIZED RECEIPTS                    |  | or each category of the  Detailed Summary Page  | (check only one)  X 11a 11b 11c 12  |
|                                      |  | , i   | 13 14 15 16 17  |
| Ar or                                | ly information copied from such Reports and Statement<br>for commercial purposes, other than using the name ar | s may not be sold or used by any persond<br>and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
|                                      | NAME OF COMMITTEE (In Full)  |   |   |
|                                      | BORDER HEALTH FEDERAL PAC  |   |   |
| A.                                   | Full Name (Last, First, Middle Initial) Dario Arango   |   | Date of Receipt   |
|                                      | Mailing Address 7004 N. Cynthia  | 7.0.1   | 04 12 2007  |
|                                      | City Sta<br>mcallen TX   | •   | Transaction ID: SA11A1.6316  Amount of Each Receipt this Period                           |
|                                      | FEC ID number of contributing federal political committee.   |   | 125.00  |
|                                      | coltomployed   | ipation<br>sician   | contribution  |
|                                      | Receipt For:  Primary  General  Other (specify) ▼  | regate Year-to-Date ▼ 500.00  |   |
| В.                                   | Full Name (Last, First, Middle Initial) Dario Arango   |   | Date of Receipt   |
|                                      | Mailing Address 7004<br>N. Cynthia   |   | 05 11 2007  |
|                                      | City Sta   | '   | Transaction ID: SA11A1.6439   |
|                                      | mcallen TX   | 78504   | Amount of Each Receipt this Period  |
|                                      | FEC ID number of contributing federal political committee.   |   | 125.00 contribution   |
|                                      | saltamployed   | ipation<br>sician   | Contribution  |
|                                      |  | regate Year-to-Date ▼   |   |
|                                      | Primary General Other (specify) ▼  | 625.00  |   |
| <u> </u>                             | Full Name (Last, First, Middle Initial) Dario Arango   |   | Date of Receipt   |
|                                      | Mailing Address 7004<br>N. Cynthia   |   | 0 6 1 5 2 0 0 7   |
|                                      | City Sta   | •   | Transaction ID: SA11A1.6565   |
|                                      | mcallen TX   | 78504   | Amount of Each Receipt this Period  |
|                                      | FEC ID number of contributing federal political committee.   |   | 125.00  |
| Name of Employer Selfemployed Physic |  | •   | contribution  |
|                                      | _ '  | regate Year-to-Date ▼   |   |
|                                      | Primary General Other (specify) ▼  | 750.00  |   |
| s                                    | UBTOTAL of Receipts This Page (optional)   |   | 375.00  |
| Т                                    | OTAL This Period (last page this line number only)   |   |   |

| SCHEDULE A (FEC Form 3X)       |  |                                   | Use separate schedule(s)            | FOR LINE NUMBER:                     | PAGE 11 / 123       |  |
|--------------------------------|--|-----------------------------------|-------------------------------------|--------------------------------------|---------------------|--|
| ITEMIZED RECEIPTS              |  |                                   | or each category of the             | (check only one)                     | 7 <b>-</b>          |  |
| THE WILL BY THE O'LLI TO       |  | Detailed Summary Page             | X 11a 11b                           | 11c   12                             |                     |  |
| Δ.                             | w information conied from auch Departs and Sta   | reat he cold or wood by any norce | 13 14                               | 15 16 17                             |                     |  |
| or                             | ly information copied from such Reports and Sta<br>for commercial purposes, other than using the n | ame and add                       | dress of any political committee to | solicit contributions from           | such committee.     |  |
| $\setminus$                    | NAME OF COMMITTEE (In Full)  |                                   |                                     |                                      |                     |  |
| $  \rangle$                    | BORDER HEALTH FEDERAL PAC  |                                   |                                     |                                      |                     |  |
| $\angle$                       |  |                                   |                                     |                                      |                     |  |
| ^                              | Full Name (Last, First, Middle Initial)  |                                   |                                     | Data of Resoint                      |                     |  |
| Α.                             | Murphy Badiga Mailing Address 1503 S. Airport  |                                   |                                     | Date of Receipt                      | / Y Y Y Y           |  |
|                                | suite 6  |                                   |                                     | 04 12                                |                     |  |
|                                | City   | State                             | Zip Code                            | Transaction ID: SA                   | A11A1.6317          |  |
|                                | weslaco  | TX                                | 78596                               | Amount of Each Re                    | ceipt this Period   |  |
|                                | FEC ID number of contributing  |                                   |                                     |                                      | 250.00              |  |
|                                | federal political committee.   | C                                 |                                     |                                      | 230.00              |  |
|                                | Name of Employer   | Occupation                        | า                                   | contribution                         |                     |  |
|                                | self-employed  | physician                         |                                     |                                      |                     |  |
|                                | Receipt For:   | <u> </u>                          | Year-to-Date ▼                      |                                      |                     |  |
|                                | Primary General  |                                   | 1000.00                             | 1                                    |                     |  |
|                                | Other (specify) ▼  |                                   | 1000.00                             |                                      |                     |  |
|                                |  |                                   |                                     |                                      |                     |  |
| В.                             | Full Name (Last, First, Middle Initial)<br>Murphy Badiga   |                                   |                                     | Date of Receipt                      |                     |  |
|                                | Mailing Address 1503 S. Airport  |                                   |                                     | M M / D D                            | / <b>Y 'Y 'Y 'Y</b> |  |
|                                | suite 6  |                                   |                                     | 05 11 2007                           |                     |  |
|                                | City   | State                             | Zip Code                            | Transaction ID: SA11A1.6440          |                     |  |
|                                | weslaco TX   |                                   | 78596                               | Amount of Each Receipt this Period   |                     |  |
|                                | FEC ID number of contributing  | C                                 |                                     |                                      | 250.00              |  |
|                                | federal political committee.   |                                   |                                     |                                      |                     |  |
|                                | Name of Employer self-employed   | Occupation                        | า                                   | contribution                         |                     |  |
|                                |  | physician                         | 1                                   |                                      |                     |  |
|                                | Receipt For:   | Aggregate                         | e Year-to-Date ▼                    |                                      |                     |  |
|                                | Primary General  |                                   | 1250.00                             |                                      |                     |  |
|                                | ☐ Other (specify) ▼  |                                   | 1 1 1 1 1 1 1                       | J                                    |                     |  |
| _                              | Full Name (Last, First, Middle Initial)  |                                   |                                     |                                      |                     |  |
| C.                             | Murphy Badiga  |                                   |                                     | Date of Receipt                      |                     |  |
|                                | Mailing Address 1503 S. Airport  |                                   |                                     | M M / D D                            |                     |  |
|                                | suite 6  |                                   | 7in Codo                            | 06 15                                | 2007                |  |
|                                | City<br>weslaco  | State<br>TX                       | Zip Code<br>78596                   | Transaction ID: SA Amount of Each Re |                     |  |
|                                |  |                                   | 70090                               | Amount of Each Ne                    | ceipi iriis Feriod  |  |
|                                | FEC ID number of contributing federal political committee.   | C                                 |                                     |                                      | 250.00              |  |
| Name of Employer self-employed |  |                                   |                                     | contribution                         |                     |  |
|                                |  | Occupation                        |                                     |                                      |                     |  |
|                                |  | physician                         | Year-to-Date ▼                      | _                                    |                     |  |
|                                | Primary General  | Aggregate                         | Teal to Bate V                      | 1                                    |                     |  |
| Other (specify)                |  |                                   | 1500.00                             |                                      |                     |  |
| _                              | · .  |                                   |                                     | <u> </u>                             |                     |  |
|                                | ·  |                                   |                                     |                                      | 750.00              |  |
| s                              | UBTOTAL of Receipts This Page (optional)   |                                   | 750.00                              |                                      |                     |  |
|                                |  |                                   |                                     |                                      |                     |  |
| T                              | OTAL This Period (last page this line number or  | nly)                              | <b>&gt;</b>                         |                                      |                     |  |

| SCHEDULE A (FEC Form 3X) |  |                      | Use separate schedule(s)   | FOR LINE NUMBER: PAGE 12 / 123  |  |  |  |
|--------------------------|--|----------------------|--|---|--|--|--|
|                          | EMIZED RECEIPTS  |                      | or each category of the Detailed Summary Page  | (check only one)    X   11a   |  |  |  |
| Ar                       | ny information copied from such Reports and Sta<br>for commercial purposes, other than using the i | atements may         | not be sold or used by any perso   | on for the purpose of soliciting contributions solicit contributions from such committee. |  |  |  |
|                          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  |                      | and the second s |   |  |  |  |
| Α.                       | Full Name (Last, First, Middle Initial) Cayetano Barrera Mailing Address 501 Mockingbird Lane      |                      |  | Date of Receipt   |  |  |  |
|                          | City<br>mcallen  | State<br>TX          | Zip Code<br>78501  | Transaction ID: SA11A1.6318  Amount of Each Receipt this Period                           |  |  |  |
|                          | FEC ID number of contributing federal political committee.   | C                    |  | 250.00  |  |  |  |
|                          | Name of Employer<br>self-employed  | Occupation           | 1  | contribution  |  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate            | e Year-to-Date ▼<br>1000.00  |   |  |  |  |
| В.                       | Full Name (Last, First, Middle Initial) Cayetano Barrera Mailing Address 501 Mockingbird Lane      |                      |  | Date of Receipt   |  |  |  |
|                          |  |                      |  | 05 11 2007  |  |  |  |
|                          | City   | State                | Zip Code   | Transaction ID: SA11A1.6441   |  |  |  |
|                          | mcallen  FEC ID number of contributing federal political committee.                                | C                    | 78501  | Amount of Each Receipt this Period  250.00  |  |  |  |
|                          | Name of Employer self-employed   | Occupation physiciar | 1  | contribution  |  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate            | e Year-to-Date ▼<br>1250.00  |   |  |  |  |
| C.                       | Full Name (Last, First, Middle Initial) Cayetano Barrera Mailing Address 501 Mockingbird Lane      |                      |  | Date of Receipt   |  |  |  |
| City State               |  | State                | Zip Code   | 0 6 1 5 2 0 0 7  Transaction ID: SA11A1.6566  |  |  |  |
|                          | <u>mcallen</u>   | TX                   | 78501  | Amount of Each Receipt this Period  |  |  |  |
|                          | FEC ID number of contributing federal political committee.   | C                    |  | 250.00  |  |  |  |
|                          | Name of Employer self-employed  Receipt For:   | Occupation physician |  | contribution  |  |  |  |
|                          | Primary General Other (specify) ▼  | Aggregate            | 1500.00  |   |  |  |  |
| s                        | UBTOTAL of Receipts This Page (optional)   | 750.00               |  |   |  |  |  |
| Т                        | OTAL This Period (last page this line number of  | only)                |  |   |  |  |  |

| 21            | CHEDULE A (FEC Form 3X)  |                            |   | FOR LINE NUMBER: PAGE 13 / 123  |   |
|---------------|--|----------------------------|---|---|---|
|               |  |                            | Use separate schedule(s)<br>or each category of the                     | (check only one)  |   |
| H             | EMIZED RECEIPTS  |                            | Detailed Summary Page   | X 11a 11b 11c 12  |   |
|               |  |                            |   | 13 14 15 16 1   | 7 |
| An<br>or      | y information copied from such Reports and Stator commercial purposes, other than using the national states. | tements may<br>ame and add | not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |   |
| $\overline{}$ | NAME OF COMMITTEE (In Full)  |                            |   |   | _ |
| $\rangle$     | BORDER HEALTH FEDERAL PAC  |                            |   |   |   |
| ۹.            | Full Name (Last, First, Middle Initial)<br>Ricardo Barrera   |                            |   | Date of Receipt   |   |
|               | Mailing Address 420 Frio   |                            |   | 04 12 2007  |   |
|               | City   | State                      | Zip Code  | Transaction ID: SA11A1.6319   |   |
|               | mission  | TX                         | 78572   | Amount of Each Receipt this Period  |   |
|               | FEC ID number of contributing federal political committee.   | C                          |   | 250.00  |   |
|               | Name of Employer self-employed   | Occupation<br>physician    |   | contribution  |   |
|               | Receipt For:   | <u> </u>                   | Year-to-Date ▼  | _   |   |
|               | Primary General  | 39 -3                      |   | 1   |   |
|               | Other (specify) ▼  | 0 0                        | 1000.00   |   |   |
| 3.            | Full Name (Last, First, Middle Initial) Ricardo Barrera  |                            |   | Date of Receipt   | _ |
|               | Mailing Address 420 Frio   | 05 11 Y Y Y Y Y Y          |   |   |   |
|               | City   | State                      | Zip Code  | Transaction ID: SA11A1.6442   |   |
|               | mission  | TX                         | 78572   | Amount of Each Receipt this Period  |   |
|               | FEC ID number of contributing federal political committee.   | С                          |   | 250.00  |   |
|               | Name of Employer self-employed   | Occupation physician       |   | contribution  |   |
|               | Receipt For:   |                            | Year-to-Date ▼  |   |   |
|               | Primary General  | 00 0                       |   | 1   |   |
|               | Other (specify) ▼  |                            | 1250.00   |   |   |
| ).            | Full Name (Last, First, Middle Initial)<br>Ricardo Barrera   |                            |   | Date of Receipt   |   |
|               | Mailing Address 420 Frio   |                            |   | 06 15 2007  |   |
|               | City   | State                      | Zip Code  | Transaction ID: SA11A1.6567   |   |
|               | mission  | TX                         | 78572   | Amount of Each Receipt this Period  |   |
|               | FEC ID number of contributing federal political committee.   | С                          |   | 250.00  |   |
|               | Name of Employer self-employed   | Occupation physician       |   | contribution  |   |
|               | Receipt For:   |                            | Year-to-Date ▼  | 7   |   |
|               | Primary General Other (specify) ▼  |                            | 1500.00   |   |   |
|               |  | 1 0 0                      | <u> </u>  |   | _ |
| S             | UBTOTAL of Receipts This Page (optional)   |                            | <b>)</b>  | 750.00  |   |
| Т             | OTAL This Period (last page this line number or  | nly)                       |   |   |   |

| SCHEDULE A (FEC Form 3X) |  |                         | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 14 / 123                       |
|--------------------------|--|-------------------------|-------------------------------------|--|
| ITEMIZED RECEIPTS        |  | or each category of the | (check only one)                    |  |
|                          | WIZED REGEII 10  |                         | Detailed Summary Page               | X   11a   11b   11c   12<br>  13   14   15   16   17 |
| Any                      | information copied from such Reports and Stat            | ements may              | not be sold or used by any perso    |  |
| or fo                    | r commercial purposes, other than using the na           | ame and add             | dress of any political committee to | solicit contributions from such committee.           |
|                          | IAME OF COMMITTEE (In Full)                              |                         |                                     |  |
|                          | BORDER HEALTH FEDERAL PAC                                |                         |                                     |  |
| <u></u>                  | "  |                         |                                     |  |
| _                        | ull Name (Last, First, Middle Initial)<br>uan Bernini    |                         |                                     | Date of Receipt                                      |
| _                        | lailing Address 2804 Santa Ana                           |                         |                                     | M M / D D / Y Y Y Y                                  |
| _                        |  |                         |                                     | 04 12 2007   |
| C                        | ity  | State                   | Zip Code                            | Transaction ID: SA11A1.6320                          |
| <u>r</u>                 | nission  | TX                      | 78574                               | Amount of Each Receipt this Period                   |
|                          | EC ID number of contributing                             | С                       |                                     | 250.00   |
| 16                       | ederal political committee.                              | 9                       |                                     |  |
| N                        | lame of Employer   | Occupation              | ı                                   | contribution   |
| -                        | elf-employed   | physician               | 1                                   |  |
| F                        | leceipt For:   | Aggregate               | Year-to-Date ▼                      |  |
|                          | Primary General Other (specify) ▼                        |                         | 1000.00                             |  |
|                          | Other (specify)  | 0 0                     | 0 0 0 0 0 0 0                       |  |
| F                        | ull Name (Last, First, Middle Initial)                   |                         |                                     |  |
| _                        | uan Bernini  |                         |                                     | Date of Receipt                                      |
| N                        | lailing Address 2804 Santa Ana                           |                         |                                     | M'M / D'D / Y'Y'Y'Y                                  |
| _                        | ta.  | 05 11 2007              |                                     |  |
|                          | ity<br>nission   | State<br>TX             | Zip Code                            | Transaction ID: SA11A1.6443                          |
| _                        |  | 1/                      | 78574                               | Amount of Each Receipt this Period                   |
|                          | EC ID number of contributing ederal political committee. | C                       |                                     | 250.00   |
| _                        | <u> </u>   |                         |                                     | contribution   |
| N<br>S                   | lame of Employer<br>elf-employed                         | Occupation              |                                     |  |
| _                        | leceipt For:   | physician               | Year-to-Date <b>V</b>               | -  |
|                          | Primary General  | Aggregate               |                                     | 1  |
|                          | Other (specify)  |                         | 1250.00                             |  |
|                          |  |                         |                                     |  |
| F                        | ull Name (Last, First, Middle Initial)                   |                         |                                     | Data of Danaint                                      |
| _                        | uan Bernini<br>failing Address 2804 Santa Ana            |                         |                                     | Date of Receipt                                      |
| 10                       | 2004 Salita Alia   |                         |                                     | 06 15 2007   |
| C                        | ity  | State                   | Zip Code                            | Transaction ID: SA11A1.6568                          |
| <u>r</u>                 | nission  | TX                      | 78574                               | Amount of Each Receipt this Period                   |
| F                        | EC ID number of contributing                             | <u> </u>                |                                     | 250.00   |
| fe                       | ederal political committee.                              | C                       |                                     | 200.00   |
| N                        | lame of Employer   | Occupation              | 1                                   | contribution   |
| colf omployed            |  | physician               |                                     |  |
| F                        | eceipt For:  | Aggregate               | Year-to-Date ▼                      |  |
|                          | Primary General  |                         | 1500.00                             |  |
|                          | Other (specify)  | 0 0                     |                                     |  |
|                          |  |                         |                                     |  |
| SUI                      | STOTAL of Receipts This Page (optional)                  |                         |                                     | 750.00   |
|                          |  |                         |                                     | -  |
| То                       | <b>FAL</b> This Period (last page this line number on    | ly)                     |                                     |  |

| SCHEDULE A (FEC Form 3X) |   |                                   | Use separate schedule(s)   | FOR LINE NUMBER: PAGE 15 / 123   |
|--------------------------|---|-----------------------------------|--|--|
|                          | EMIZED RECEIPTS   |                                   | or each category of the Detailed Summary Page  | (check only one)  X 11a 11b 11c 12  13 14 15 16 17   |
| Ar                       | ny information copied from such Reports and Si<br>for commercial purposes, other than using the   | tatements may                     | not be sold or used by any personal responsible to the sold or used by any personal responsible to the sold of the | n for the purpose of soliciting contributions  |
| Š                        | NAME OF COMMITTEE (In Full)  BORDER HEALTH FEDERAL PAC  | Traine and date                   | areas of any pointed committee to  | CONTRACTOR TO THE CONTRACTOR T |
| Α.                       | Full Name (Last, First, Middle Initial) Sarojini Bose Mailing Address 7007 N 1st Lane  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer self-employed | State TX  C  Occupation physician |  | Date of Receipt    M M   |
|                          | Receipt For: Primary General Other (specify)  |                                   | e Year-to-Date ▼ 1000.00   |  |
| В.                       | Full Name (Last, First, Middle Initial) Sarojini Bose  Mailing Address 7007 N 1st Lane  |                                   |  | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
|                          | City  | State                             | Zip Code   | Transaction ID: SA11A1.6444  |
|                          | mcallen  FEC ID number of contributing federal political committee.  Name of Employer self-employed  Receipt For: Primary General   | C Occupation physician Aggregate  |  | Amount of Each Receipt this Period  250.00  contribution   |
| <br>C.                   | Other (specify) ▼  Full Name (Last, First, Middle Initial) Sarojini Bose  Mailing Address 7007 N 1st Lane   | 0 0                               | 1250.00  | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
|                          | City  | State                             | Zip Code   | Transaction ID: SA11A1.6569  |
|                          | mcallen FEC ID number of contributing federal political committee.  | C                                 | 78504  | Amount of Each Receipt this Period  250.00   |
|                          | Name of Employer self-employed  Receipt For:  Primary General  Other (specify) ▼  | Occupation physician Aggregate    |  | contribution   |
| s                        | UBTOTAL of Receipts This Page (optional)  |                                   |  | 750.00   |
| Т                        | OTAL This Period (last page this line number  | only)                             |  |  |

| SCHEDULE A (FEC Form 3X) |  | Llac concrete cohodula(a)                        |                                     | FOR LINE NUMBER: PAGE 16 / 123   |
|--------------------------|--|--|-------------------------------------|--|
| ITEMIZED RECEIPTS        |  | Use separate schedule(s) or each category of the |                                     | (check only one)   |
| TI LIVIIZED TIEOLII 13   |  | Detailed Summary Page                            |                                     | X   11a   11b   11c   12   |
| Δ                        | information conicd from such Deposits and Ci   |  |                                     | 13 14 15 16 17   |
| or                       | y information copied from such Reports and Si<br>for commercial purposes, other than using the | name and add                                     | dress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |
| $\setminus$              | NAME OF COMMITTEE (In Full)  |  |                                     |  |
|                          | BORDER HEALTH FEDERAL PAC  |  |                                     |  |
| A.                       |  |  |                                     | Date of Receipt  |
|                          | Mailing Address 2005 Cimarron Court  |  |                                     | 04 12 2007   |
|                          | City   | State  | Zip Code                            | Transaction ID: SA11A1.6322  |
|                          | mission  | TX   | 78572                               | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | C  |                                     | 250.00   |
|                          | Name of Employer self-employed   | Occupation physician                             |                                     | contribution   |
|                          | Receipt For:   |  | Year-to-Date ▼                      |  |
|                          | Primary General  |  | 1000.00                             | 7  |
|                          | Other (specify) ▼  |  | 1000.00                             |  |
| В.                       | Full Name (Last, First, Middle Initial) Francisco Bracamontes                                  |  |                                     | Date of Receipt  |
|                          | Mailing Address 2005 Cimarron Court  |  |                                     | 05 11 2007   |
|                          | City   | State  | Zip Code                            | Transaction ID: SA11A1.6445  |
|                          | mission  | TX   | 78572                               | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | C  |                                     | 250.00   |
|                          | Name of Employer self-employed   | Occupation physician                             |                                     | contribution   |
|                          | Receipt For:   |  | e Year-to-Date ▼                    |  |
|                          | Primary General  |  | 1250.00                             | 7  |
|                          | Other (specify) ▼  |  | 1230.00                             |  |
| C.                       | Full Name (Last, First, Middle Initial) Francisco Bracamontes                                  |  |                                     | Date of Receipt  |
| ٠.                       | Mailing Address 2005 Cimarron Court  |  |                                     | M M / D D / Y Y Y Y  |
|                          |  |  |                                     | 06 15 2007   |
|                          | City   | State  | Zip Code                            | Transaction ID: SA11A1.6570  |
|                          | mission  | TX   | 78572                               | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | C  |                                     | 250.00   |
|                          | Name of Employer self-employed   | Occupation physician                             |                                     | contribution   |
|                          | Receipt For:   | Aggregate  | e Year-to-Date ▼                    |  |
|                          | Primary General Other (specify) ▼  | 0 0  | 1500.00                             |  |
| S                        | UBTOTAL of Receipts This Page (optional)   |  |                                     | 750.00   |
| $\vdash$                 |  |  |                                     |  |
| T                        | OTAL This Period (last page this line number   | only)  |                                     |  |

| SCHEDULE A (FEC Form 3X) |   |                      | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 17 / 123             |               |
|--------------------------|---|----------------------|-------------------------------------|--|---------------|
| ITEMIZED RECEIPTS        |   |                      | or each category of the             | (check only one)                           |               |
| ••                       |   |                      | Detailed Summary Page               | X 11a 11b 11c 12<br>13 14 15 16            | 17            |
| Δη                       | w information copied from such Reports and S  | tatomente may        | y not be sold or used by any perso  |  | 11/           |
| or                       | y information copied from such Reports and S<br>for commercial purposes, other than using the | name and add         | dress of any political committee to | solicit contributions from such committee. |               |
| $\setminus$              | NAME OF COMMITTEE (In Full)   |                      |                                     |  |               |
| $\rangle$                | BORDER HEALTH FEDERAL PAC   |                      |                                     |  |               |
| A.                       | Full Name (Last, First, Middle Initial) Robert Brace  |                      |                                     | Date of Receipt                            |               |
|                          | Mailing Address 2000 N. 8th Street  |                      |                                     | 04 12 2007                                 |               |
|                          | City  | State                | Zip Code                            | Transaction ID: SA11A1.6323                |               |
|                          | mcallen   | TX                   | 78501                               | Amount of Each Receipt this Period         | _             |
|                          | FEC ID number of contributing federal political committee.                                    | C                    |                                     | 250.00                                     |               |
|                          | Name of Employer self-employed  | Occupation physician |                                     | contribution                               |               |
|                          | Receipt For:  |                      | Year-to-Date ▼                      | 7  |               |
|                          | Primary General   |                      | 1000.00                             |  |               |
|                          | Other (specify) ▼   | 0 0                  | 1000.00                             |  |               |
| В.                       | Full Name (Last, First, Middle Initial)<br>Robert Brace                                       |                      |                                     | Date of Receipt                            |               |
|                          | Mailing Address 2000 N. 8th Street  |                      |                                     | 05 11 7 2007                               |               |
|                          | City  | State                | Zip Code                            | Transaction ID: SA11A1.6447                |               |
|                          | mcallen   | TX                   | 78501                               | Amount of Each Receipt this Period         |               |
|                          | FEC ID number of contributing federal political committee.                                    | C                    |                                     | 250.00                                     |               |
|                          | Name of Employer self-employed  | Occupation           |                                     | contribution                               |               |
|                          |   | physiciar            |                                     |  |               |
|                          | Receipt For:  | Aggregate            | e Year-to-Date ▼                    |  |               |
|                          | Primary General Other (specify) ▼   |                      | 1250.00                             |  |               |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Robert Brace  |                      |                                     | Date of Receipt                            |               |
|                          | Mailing Address 2000 N. 8th Street  |                      |                                     | 0 6 1 5 2 0 0 7                            |               |
|                          | City  | State                | Zip Code                            | Transaction ID: SA11A1.6572                |               |
|                          | mcallen   | TX                   | 78501                               | Amount of Each Receipt this Period         |               |
|                          | FEC ID number of contributing federal political committee.                                    | C                    |                                     | 250.00                                     |               |
|                          | Name of Employer self-employed  |                      | 1<br>1                              | contribution                               |               |
|                          | Receipt For:  | Aggregate            | Year-to-Date ▼                      |  |               |
|                          | Primary General Other (specify) ▼   | 0 0                  | 1500.00                             |  |               |
|                          | UPTOTAL of Descipts This Dawn (anti-un)   |                      |                                     | 750.00                                     | $\overline{}$ |
|                          | UBTOTAL of Receipts This Page (optional)  |                      | =                                   |  |               |
| T                        | OTAL This Period (last page this line number  | only)                | <b>)</b>                            |  |               |

| SCHEDULE A (FEC Form 3X) |  |                  | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 18 / 123              |  |
|--------------------------|--|------------------|-------------------------------------|---|--|
| ITEMIZED RECEIPTS        |  |                  | or each category of the             | (check only one)                            |  |
| ••                       | EMIZED RESERVES  |                  | Detailed Summary Page               | X 11a 11b 11c 12                            |  |
| Δ                        | ny information copied from such Reports and Si                         | tatamente may    | rnot he cold or used by any nore    | 13 14 15 16 17                              |  |
| or                       | for commercial purposes, other than using the                          | name and add     | dress of any political committee to | osolicit contributions from such committee. |  |
| $\setminus$              | NAME OF COMMITTEE (In Full)  |                  |                                     |   |  |
|                          | BORDER HEALTH FEDERAL PAC  |                  |                                     |   |  |
| Α.                       | Full Name (Last, First, Middle Initial) Alonzo Cantu                   |                  |                                     | Date of Receipt                             |  |
| Α.                       | Mailing Address P.O.Box 2673   |                  |                                     | M M / D D / Y Y Y Y                         |  |
|                          | -  |                  |                                     | 04 12 2007                                  |  |
|                          | City   | State            | Zip Code                            | Transaction ID: SA11A1.6324                 |  |
|                          | mcallen  | TX               | 78502                               | Amount of Each Receipt this Period          |  |
|                          | FEC ID number of contributing federal political committee.             | C                |                                     | 250.00                                      |  |
|                          | Name of Employer self-employed   | Occupation       |                                     | contribution                                |  |
|                          |  | private in       |                                     | _   |  |
|                          | Receipt For:  Primary  General   | Aggregate        | Year-to-Date ▼                      | -   |  |
|                          | Other (specify)  |                  | 1000.00                             |   |  |
|                          |  |                  |                                     | _   |  |
| В.                       | Full Name (Last, First, Middle Initial)<br>Alonzo Cantu                |                  |                                     | Date of Receipt                             |  |
|                          | Mailing Address P.O.Box 2673   |                  |                                     | M M / D D / Y Y Y Y                         |  |
|                          |  |                  |                                     | 05 11 2007                                  |  |
|                          | City   | State            | Zip Code                            | Transaction ID: SA11A1.6448                 |  |
|                          | mcallen  | TX               | 78502                               | Amount of Each Receipt this Period          |  |
|                          | FEC ID number of contributing federal political committee.             | C                |                                     | 250.00                                      |  |
|                          | Name of Employer self-employed   | Occupation       | <br>1                               | contribution                                |  |
|                          | self-employed  | private in       | vestor                              |   |  |
|                          | Receipt For:   | Aggregate        | e Year-to-Date ▼                    |   |  |
|                          | Primary General  |                  | 1250.00                             | 7   |  |
|                          | Other (specify) ▼  |                  |                                     |   |  |
| C.                       | Full Name (Last, First, Middle Initial)<br>Alonzo Cantu                |                  |                                     | Date of Receipt                             |  |
|                          | Mailing Address P.O.Box 2673   |                  |                                     | 0 6 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |  |
|                          | City   | State            | Zip Code                            | Transaction ID: SA11A1.6573                 |  |
|                          | mcallen  | TX               | 78502                               | Amount of Each Receipt this Period          |  |
|                          | FEC ID number of contributing  |                  |                                     |   |  |
|                          | federal political committee.   |                  |                                     | 250.00                                      |  |
|                          | Name of Employer   | Occupation       |                                     | contribution                                |  |
|                          | self-employed private in  Receipt For: Primary General Other (specify) |                  |                                     |   |  |
|                          |  |                  | e Year-to-Date ▼                    | _   |  |
|                          |  |                  | 1500.00                             |   |  |
|                          |  | 0 0              | 0 0 0 0 0 0 0                       | -   |  |
|                          |  |                  |                                     | 750.00                                      |  |
| S                        | UBTOTAL of Receipts This Page (optional)                               |                  |                                     | 750.00                                      |  |
| _                        | OTAL This Period (last page this line number                           | anly)            |                                     |   |  |
| 1 1                      |  | ٠٠.، <i>١</i> ٠/ |                                     |   |  |

|                          |   |  |                                   | FOR LINE NUMBER: PAGE 19 / 123     |
|--------------------------|---|--|-----------------------------------|------------------------------------|
| SCHEDULE A (FEC Form 3X) |   | Use separate schedule(s)                     |                                   | (check only one)                   |
| ITEMIZED RECEIPTS        |   |  | or each category of the           | X 11a  11b  11c  12                |
|                          |   |  | Detailed Summary Page             | 13 14 15 16 17                     |
| ۸r                       | ny information copied from such Reports and St          | atomonte may                                 | y not be cold or used by any pers |                                    |
| or                       | for commercial purposes, other than using the           | o solicit contributions from such committee. |                                   |                                    |
| abla                     | NAME OF COMMITTEE (In Full)                             |  |                                   |                                    |
| $  \rangle$              | BORDER HEALTH FEDERAL PAC                               |  |                                   |                                    |
| $\angle$                 |   |  |                                   | 1                                  |
| Α.                       | Full Name (Last, First, Middle Initial) Carlos Cardenas |  |                                   | Date of Receipt                    |
|                          | Mailing Address 1000 N. Taylor Road                     |  |                                   | M M / D D / Y Y Y Y                |
|                          |   |  |                                   | 04 12 2007                         |
|                          | City  | State  | Zip Code                          | Transaction ID: SA11A1.6325        |
|                          | mcallen   | TX   | 78501                             | Amount of Each Receipt this Period |
|                          | FEC ID number of contributing                           |  |                                   | 250.00                             |
|                          | federal political committee.                            | C  |                                   | 250.00                             |
|                          | Name of Employer  | Occupation                                   | 1                                 | contribution                       |
|                          | self-employed   | physician                                    |                                   |                                    |
|                          | Receipt For:  |  | Year-to-Date ▼                    |                                    |
|                          | Primary General   |  |                                   | 7                                  |
|                          | Other (specify) ▼                                       | 1  | 1000.00                           |                                    |
|                          |   |  |                                   | -                                  |
| _                        | Full Name (Last, First, Middle Initial)                 |  |                                   | Pala of Paradal                    |
| В.                       |   |  |                                   | Date of Receipt                    |
|                          | Mailing Address 1000 N. Taylor Road                     | 05 11 2007                                   |                                   |                                    |
|                          | City  | Transaction ID: SA11A1.6449                  |                                   |                                    |
|                          | mcallen   | TX   | 78501                             | Amount of Each Receipt this Period |
|                          | FEC ID number of contributing                           |  |                                   |                                    |
|                          | federal political committee.                            | C  |                                   | 250.00                             |
|                          | Name of Familians                                       | 10   |                                   | contribution                       |
|                          | Name of Employer self-employed                          | Occupation                                   |                                   |                                    |
|                          | Receipt For:  | physician                                    | Year-to-Date ▼                    | _                                  |
|                          | Primary General   | Aggregate                                    | rear-to-date V                    | -                                  |
|                          | Other (specify)   |  | 1250.00                           |                                    |
|                          | and (epseny) <b>V</b>                                   |  | 0 0 0 0 0 0 0                     | 4                                  |
|                          | Full Name (Last, First, Middle Initial)                 |  |                                   |                                    |
| C.                       | Carlos Cardenas   |  |                                   | Date of Receipt                    |
|                          | Mailing Address 1000 N. Taylor Road                     |  |                                   | 06 15 2007                         |
|                          | City  | State  | Zip Code                          | Transaction ID: SA11A1.6574        |
|                          | mcallen   | TX   | 78501                             | Amount of Each Receipt this Period |
|                          | FEC ID number of contributing                           |  |                                   | 050.00                             |
|                          | federal political committee.                            | C  |                                   | 250.00                             |
|                          | Name of Employer  | Ossunation                                   |                                   | contribution                       |
|                          | Name of Employer self-employed                          | Occupation physician                         |                                   |                                    |
|                          | Receipt For:  |  | Year-to-Date ▼                    | $\dashv$                           |
|                          | Primary General   | , iggregate                                  | Total to Date ¥                   | 7                                  |
|                          | Other (specify)   |  | 1500.00                           |                                    |
|                          |   |  |                                   | "                                  |
|                          |   |  |                                   |                                    |
| s                        | UBTOTAL of Receipts This Page (optional)                |  | 1                                 | 750.00                             |
| $\vdash$                 |   |  |                                   | _                                  |

TOTAL This Period (last page this line number only) .....

|                          |   |                      |   | _   |
|--------------------------|---|----------------------|---|---|
| SCHEDULE A (FEC Form 3X) |   |                      | Use separate schedule(s)  | FOR LINE NUMBER: PAGE 20 / 123 (check only one)   |
| IT                       | EMIZED RECEIPTS   |                      | or each category of the   |   |
| 11                       | LIVIIZED RECEIP 13  |                      | Detailed Summary Page   | X 11a 11b 11c 12  |
|                          |   |                      | , ,   | 13 14 15 16 17  |
| Ar                       | y information copied from such Reports and Sta<br>for commercial purposes, other than using the n | tements may          | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
|                          | NAME OF COMMITTEE (In Full)   |                      |   |   |
| $\rangle$                | BORDER HEALTH FEDERAL PAC   |                      |   |   |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Jose Carreras  |                      |   | Date of Receipt   |
|                          | Mailing Address 1016 E. Griffin Parkway   |                      |   | 04 12 2007  |
|                          | City  | State                | Zip Code  | Transaction ID: SA11A1.6367   |
|                          | mission   | TX                   | 78572   | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.  | C                    |   | 250.00  |
|                          | Name of Employer self-employed  | Occupation physician |   | contribution  |
|                          | Receipt For:  | 1                    | e Year-to-Date ▼  |   |
|                          | Primary General   |                      | 1000.00   | 1   |
|                          | Other (specify) ▼   | 0 0                  | 1000.00   |   |
| В.                       | Full Name (Last, First, Middle Initial) Jose Carreras   |                      |   | Date of Receipt   |
|                          | Mailing Address 1016 E. Griffin Parkway   |                      |   | 05 11 2007  |
|                          | City  | State                | Zip Code  | Transaction ID: SA11A1.6489   |
|                          | mission   | TX                   | 78572   | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing   |                      |   | 050.00  |
|                          | federal political committee.  | C                    |   | 250.00 contribution   |
|                          | Name of Employer self-employed  | Occupation physician | 1   |   |
|                          | Receipt For:  | Aggregate            | e Year-to-Date ▼  |   |
|                          | Primary General Other (specify) ▼   |                      | 1250.00   |   |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Jose Carreras   |                      |   | Date of Receipt   |
|                          | Mailing Address 1016 E. Griffin Parkway   |                      |   | 0 6 1 5 2 0 0 7   |
|                          | City  | State                | Zip Code  | Transaction ID: SA11A1.6575   |
|                          | mission   | TX                   | 78572   | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.  | C                    |   | 250.00  |
|                          | Name of Employer self-employed  | Occupation           |   | contribution  |
|                          |   | physiciar            |   |   |
|                          | Receipt For:  | Aggregate            | e Year-to-Date ▼  |   |
|                          | Primary General   |                      | 1500.00   | 1   |
|                          | Other (specify) ▼   | 0 0                  | 1300.00   | 1   |
| s                        | UBTOTAL of Receipts This Page (optional)  |                      |   | 750.00  |
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TOTAL This Period (last page this line number only) .....

| SCHEDULE A (FEC Form 3X) |  | Han annewste anhadula(a)                         |  | FOR LINE NUMBER: PAGE 21 / 123   |
|--------------------------|--|--|--|--|
| ITEMIZED RECEIPTS        |  | Use separate schedule(s) or each category of the |  | (check only one)   |
| TI LIMIZED NECEIF 13     |  | Detailed Summary Page                            |  | X   11a   11b   11c   12   |
| Δ                        |  |  |  | 13 14 15 16 17   |
| or                       | y information copied from such Reports and Si<br>for commercial purposes, other than using the | name and ado                                     | rnot be sold or used by any persitress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |
| $\setminus$              | NAME OF COMMITTEE (In Full)  |  |  |  |
|                          | BORDER HEALTH FEDERAL PAC  |  |  |  |
| A.                       | Full Name (Last, First, Middle Initial) Augusto Castrillon                                     |  |  | Date of Receipt  |
|                          | Mailing Address 223 Rio Grande Drive   |  |  | 04 12 4 2007   |
|                          | City   | State  | Zip Code   | Transaction ID: SA11A1.6326  |
|                          | mission  | TX   | 78572  | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | C  |  | 250.00   |
|                          | Name of Employer self-employed   | Occupation physician                             |  | contribution   |
|                          | Receipt For:   |  | Year-to-Date ▼   |  |
|                          | Primary General  |  | 1000.00  | 7  |
|                          | Other (specify) ▼  |  | 1000.00  |  |
| В.                       | Full Name (Last, First, Middle Initial) Augusto Castrillon                                     |  |  | Date of Receipt  |
|                          | Mailing Address 223 Rio Grande Drive   |  |  | 05 11 2007   |
|                          | City   | State  | Zip Code   | Transaction ID: SA11A1.6450  |
|                          | mission  | TX   | 78572  | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | C  |  | 250.00   |
|                          | Name of Employer self-employed   | Occupation physician                             |  | contribution   |
|                          | Receipt For:   |  | Year-to-Date ▼   |  |
|                          | Primary General  |  | 1050.00  | 1  |
|                          | Other (specify) ▼  | 0 0  | 1250.00  |  |
| C.                       | Full Name (Last, First, Middle Initial) Augusto Castrillon                                     |  |  | Date of Receipt  |
| Ο.                       | Mailing Address 223 Rio Grande Drive   |  |  | M M / D D / Y Y Y Y  |
|                          |  |  |  | 06 15 2007   |
|                          | City   | State  | Zip Code   | Transaction ID: SA11A1.6576  |
|                          | mission  | TX   | 78572  | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | C  |  | 250.00   |
|                          | Name of Employer self-employed   | Occupation physician                             |  | contribution   |
|                          | Receipt For:   | Aggregate  | Year-to-Date ▼   |  |
|                          | Primary General Other (specify) ▼  | 0 0  | 1500.00  |  |
| s                        | UBTOTAL of Receipts This Page (optional)   |  |  | 750.00   |
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| T                        | OTAL This Period (last page this line number of  | only)  |  |  |

| SCHEDULE A (FEC Form 3X) |   |                         | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 22 / 123               |
|--------------------------|---|-------------------------|-------------------------------------|--|
| ITEMIZED RECEIPTS        |   | or each category of the |                                     | (check only one)                             |
| ••                       | LIMIZED RESENTS                               |                         | Detailed Summary Page               | X 11a 11b 11c 12                             |
| ۸r                       | y information copied from such Reports and S  | tatamente may           | rnot he cold or used by any nore.   | 13 14 15 16 17                               |
| or                       | for commercial purposes, other than using the | name and add            | dress of any political committee to | o solicit contributions from such committee. |
| $\setminus$              | NAME OF COMMITTEE (In Full)                   |                         |                                     |  |
|                          | BORDER HEALTH FEDERAL PAC                     |                         |                                     |  |
| _                        | Full Name (Last, First, Middle Initial)       |                         |                                     | 5. 75 1.                                     |
| A.                       | Norma Cavazos-Salas                           |                         |                                     | Date of Receipt                              |
|                          | Mailing Address 2301 N. Bryan Road            |                         |                                     | 04 12 2007                                   |
|                          | City  | State                   | Zip Code                            | Transaction ID: SA11A1.6327                  |
|                          | mission                                       | TX                      | 78572                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing                 | С                       |                                     | 250.00                                       |
|                          | federal political committee.                  |                         |                                     |  |
|                          | Name of Employer self-employed                | Occupation              | 1                                   | contribution                                 |
|                          | self-employed                                 | physician               | 1                                   |  |
|                          | Receipt For:                                  | Aggregate               | e Year-to-Date ▼                    |  |
|                          | Primary General                               |                         | 1000.00                             |  |
|                          | Other (specify) ▼                             | 0 0                     |                                     | 1  |
| _                        | Full Name (Last, First, Middle Initial)       |                         |                                     |  |
| В.                       | Norma Cavazos-Salas                           |                         |                                     | Date of Receipt                              |
|                          | Mailing Address 2301 N. Bryan Road            |                         |                                     | 0 5 1 1 2 0 0 7                              |
|                          | City  | State                   | Zip Code                            | Transaction ID: SA11A1.6451                  |
|                          | mission                                       | TX                      | 78572                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing                 |                         |                                     |  |
|                          | federal political committee.                  | C                       |                                     | 250.00                                       |
|                          | Name of Employer                              | Occupation              | <u> </u>                            | contribution                                 |
|                          | Name of Employer self-employed                | physician               |                                     |  |
|                          | Receipt For:                                  | Aggregate               | e Year-to-Date ▼                    |  |
|                          | Primary General                               |                         | 1250.00                             | 7  |
|                          | Other (specify)                               | 0 0                     | 1200.00                             | J  |
| _                        | Full Name (Last, First, Middle Initial)       |                         |                                     |  |
| C.                       | Norma Cavazos-Salas                           |                         |                                     | Date of Receipt                              |
|                          | Mailing Address 2301 N. Bryan Road            |                         |                                     | 06 15 2007                                   |
|                          | City  | State                   | Zip Code                            | Transaction ID: SA11A1.6577                  |
|                          | mission                                       | TX                      | 78572                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing                 |                         |                                     | 250.00                                       |
|                          | federal political committee.                  | C                       |                                     | 230.00                                       |
|                          | Name of Employer                              | Occupation              | 1                                   | contribution                                 |
|                          | self-employed physic                          |                         |                                     |  |
|                          |   |                         | e Year-to-Date ▼                    |  |
|                          |   |                         | 1500.00                             | 1  |
|                          |   |                         | 1000.00                             | 1  |
| Г                        |   |                         |                                     |  |
| s                        | UBTOTAL of Receipts This Page (optional)      |                         |                                     | 750.00                                       |
| $\vdash$                 |   |                         |                                     |  |
| T                        | OTAL This Period (last page this line number  | only)                   |                                     |  |

| SCHEDULE A (FEC Form 3X)          |  |                      | Use separate schedule(s)            | FOR LINE NUMBER:                       | PAGE 23 / 123      |
|-----------------------------------|--|----------------------|-------------------------------------|--|--------------------|
| ITEMIZED RECEIPTS                 |  |                      | or each category of the             | (check only one)                       | . —                |
| ••                                | LIMIZED REGEN 13   |                      | Detailed Summary Page               | X 11a 11b                              | 11c   12           |
| Δ.                                | w information copied from such Deports and C   | totomonto mo         | reat he hald ar used by any person  | 13 14                                  | 15 16 17           |
| or                                | ly information copied from such Reports and S<br>for commercial purposes, other than using the | name and add         | dress of any political committee to | solicit contributions from s           | such committee.    |
| $\setminus$                       | NAME OF COMMITTEE (In Full)  |                      |                                     |  |                    |
| $ \rangle$                        | BORDER HEALTH FEDERAL PAC  |                      |                                     |  |                    |
| $\angle$                          |  |                      |                                     | 1                                      |                    |
| Α.                                | Full Name (Last, First, Middle Initial)  R. Chandrarasekharan                                  |                      |                                     | Date of Receipt                        |                    |
|                                   | Mailing Address 1210 East 8th street   |                      |                                     | M M / D D                              | / Y Y Y Y          |
|                                   | suite 1  |                      |                                     | 0 4 1 2                                | 2007               |
|                                   | City   | State                | Zip Code                            | Transaction ID: SA                     | .11A1.6328         |
|                                   | weslaco  | TX                   | 78591                               | Amount of Each Red                     | eipt this Period   |
|                                   | FEC ID number of contributing  | С                    |                                     |  | 250.00             |
|                                   | federal political committee.   |                      |                                     |  |                    |
|                                   | Name of Employer self-employed   | Occupation           | n                                   | contribution                           |                    |
|                                   |  | physiciar            |                                     |  |                    |
|                                   | Receipt For:   | Aggregate            | e Year-to-Date ▼                    |  |                    |
|                                   | Primary General Other (specify) ▼  |                      | 1000.00                             |  |                    |
|                                   | Cirici (Specify)   | 1 1                  |                                     | J                                      |                    |
| _                                 | Full Name (Last, First, Middle Initial)  | <u>I</u>             |                                     |  |                    |
| В.                                | R. Chandrarasekharan   |                      |                                     | Date of Receipt                        |                    |
|                                   | Mailing Address 1210 East 8th street   |                      |                                     | 05 11 2007                             |                    |
|                                   | Suite 1 City   | State                | Zip Code                            |  |                    |
|                                   | weslaco  | TX                   | 78591                               | Transaction ID: SA  Amount of Each Rec |                    |
|                                   |  |                      | 70001                               | Amount of Lacif Net                    | <del> </del>       |
|                                   | FEC ID number of contributing federal political committee.                                     | C                    |                                     |  | 250.00             |
|                                   | Name of European   | 10                   |                                     | contribution                           |                    |
|                                   | Name of Employer self-employed   | Occupation physiciar |                                     |  |                    |
|                                   | Receipt For:   |                      | Year-to-Date ▼                      | _                                      |                    |
|                                   | Primary General  | 35 -5                |                                     | 1                                      |                    |
|                                   | Other (specify) ▼  |                      | 1250.00                             |  |                    |
|                                   |  |                      |                                     |  |                    |
| C.                                | Full Name (Last, First, Middle Initial)  R. Chandrarasekharan                                  |                      |                                     | Date of Receipt                        |                    |
| C.                                | Mailing Address 1210 East 8th street   |                      |                                     | M M / D D                              | / <b>Y Y Y Y Y</b> |
|                                   | suite 1  |                      |                                     | 0 6 1 5                                | 2007               |
|                                   | City   | State                | Zip Code                            | Transaction ID: SA                     | .11A1.6578         |
|                                   | weslaco  | TX                   | 78591                               | Amount of Each Red                     | eipt this Period   |
|                                   | FEC ID number of contributing  | С                    |                                     |  | 250.00             |
|                                   | federal political committee.   |                      |                                     |  |                    |
|                                   | Name of Employer   | Occupation           | n                                   | contribution                           |                    |
|                                   | Receipt For:   |                      | 1                                   |  |                    |
|                                   |  |                      | e Year-to-Date ▼                    |  |                    |
| Primary General Other (specify) ▼ |  |                      | 1500.00                             |  |                    |
|                                   | Cirici (Specify)   |                      | J.                                  |  |                    |
| Г                                 |  |                      |                                     |  |                    |
| s                                 | UBTOTAL of Receipts This Page (optional)   |                      |                                     |  | 750.00             |
| $\vdash$                          | ,  |                      | •                                   | -                                      |                    |
| т                                 | OTAL This Period (last page this line number   | only)                |                                     |  |                    |

| SCHEDULE A (FEC Form 3X) |   | Use separate schedule(s) | FOR LINE NUMBER: PAGE 24 / 123 (check only one)                     |   |  |  |  |
|--------------------------|---|--------------------------|---|---|--|--|--|
| IT                       | EMIZED RECEIPTS   |                          | or each category of the<br>Detailed Summary Page                    | X   11a   |  |  |  |
| Ar<br>or                 | ny information copied from such Reports and St<br>for commercial purposes, other than using the | atements may             | not be sold or used by any persidress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |  |  |  |
| $\setminus$              | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |                          |   |   |  |  |  |
| Α.                       | Full Name (Last, First, Middle Initial) Diana Cortinas  |                          |   | Date of Receipt   |  |  |  |
|                          | Mailing Address 1400 Northgate Lane   |                          |   | 0 4 1 2 2 0 0 7   |  |  |  |
|                          | City  | State                    | Zip Code  | Transaction ID: SA11A1.6333   |  |  |  |
|                          | mcallen  FEC ID number of contributing federal political committee.                             | C                        | 78504   | Amount of Each Receipt this Period  146.60  |  |  |  |
|                          | Name of Employer self-employed  | Occupation physiciar     |   | contribution  |  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                | e Year-to-Date ▼ 540.90   |   |  |  |  |
| В.                       | Full Name (Last, First, Middle Initial) Diana Cortinas  Mailing Address 1400 Northgate Lane     |                          |   | Date of Receipt   |  |  |  |
|                          |   |                          |   | 05 11 2007  |  |  |  |
|                          | City  | State                    | Zip Code  | Transaction ID: SA11A1.6455   |  |  |  |
|                          | mcallen   | TX                       | 78504   | Amount of Each Receipt this Period  |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                      | C                        |   | 154.69 contribution   |  |  |  |
|                          | Name of Employer self-employed  | Occupation physiciar     |   | Contribution  |  |  |  |
|                          | Receipt For:  | Aggregate                | e Year-to-Date ▼  |   |  |  |  |
|                          | Primary General Other (specify) ▼   |                          | 695.59  |   |  |  |  |
| <u>с.</u>                | Full Name (Last, First, Middle Initial) Diana Cortinas  |                          |   | Date of Receipt   |  |  |  |
|                          | Mailing Address 1400 Northgate Lane   |                          |   | 0 6 1 5 2 0 0 7   |  |  |  |
|                          | City  | State                    | Zip Code  | Transaction ID: SA11A1.6581   |  |  |  |
|                          | mcallen   | TX                       | 78504   | Amount of Each Receipt this Period  |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                      | C                        |   | 125.26  |  |  |  |
|                          | Name of Employer self-employed  | Occupation physiciar     |   | contribution  |  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                | e Year-to-Date ▼ 820.85   |   |  |  |  |
| s                        | SUBTOTAL of Receipts This Page (optional)   |                          |   |   |  |  |  |
| <b> </b>                 | OTAL This Period (last nage this line number of   | anly)                    |   |   |  |  |  |

| SCHEDULE A (FEC Form 3X) |  |                         | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 25 / 123                                  |
|--------------------------|--|-------------------------|-------------------------------------|---|
| ITEMIZED RECEIPTS        |  | or each category of the |                                     | (check only one)  |
| ••                       | EMIZED RECEIL TO                               |                         | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17                         |
| Δr                       | ny information copied from such Reports and Si | tatements may           | y not he sold or used by any ners   |   |
| or                       | for commercial purposes, other than using the  | name and add            | dress of any political committee to | o solicit contributions from such committee.                    |
| $\setminus$              | NAME OF COMMITTEE (In Full)                    |                         |                                     |   |
| $ \rangle$               | BORDER HEALTH FEDERAL PAC                      |                         |                                     |   |
|                          | Full Name (Last, First, Middle Initial)        |                         |                                     |   |
| A.                       | Guillermo Cortinas                             |                         |                                     | Date of Receipt   |
|                          | Mailing Address 1224 Northgate Lane            |                         |                                     | M M / D D / Y Y Y Y   |
|                          | City   | Ctata                   | 7in Cada                            | 04 12 2007  |
|                          | City<br>mcallen                                | State<br>TX             | Zip Code<br>78504                   | Transaction ID: SA11A1.6329  Amount of Each Receipt this Period |
|                          | FEC ID number of contributing                  |                         | 70304                               |   |
|                          | federal political committee.                   | C                       |                                     | 163.58  |
|                          | Name of Employer                               | Occupation              | n                                   | contribution  |
|                          | self-employed                                  | physician               |                                     |   |
|                          | Receipt For:                                   |                         | Year-to-Date ▼                      |   |
|                          | Primary General                                |                         | 603.57                              | 1   |
|                          | Other (specify)                                |                         | 000.07                              |   |
| _                        | Full Name (Last, First, Middle Initial)        |                         |                                     |   |
| В.                       |  |                         |                                     | Date of Receipt   |
|                          | Mailing Address 1224 Northgate Lane            |                         |                                     | 0.5 1.1 2.00.7  |
|                          | City   | State                   | Zip Code                            |   |
|                          | mcallen  | TX                      | 78504                               | Transaction ID: SA11A1.6453  Amount of Each Receipt this Period |
|                          | FEC ID number of contributing                  |                         | 7000+                               |   |
|                          | federal political committee.                   | C                       |                                     | 172.61  |
|                          | Name of Employer                               | Occupation              | n                                   | contribution  |
|                          | Name of Employer self-employed                 | physician               |                                     |   |
|                          | Receipt For:                                   |                         | Year-to-Date ▼                      |   |
|                          | Primary General                                |                         | 776.18                              | 1   |
|                          | Other (specify) ▼                              |                         | 770.10                              |   |
| _                        | Full Name (Last, First, Middle Initial)        |                         |                                     |   |
| C.                       | Guillermo Cortinas                             |                         |                                     | Date of Receipt   |
|                          | Mailing Address 1224 Northgate Lane            |                         |                                     | 0 6 1 5 2 0 0 7   |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6579                                     |
|                          | <u>mcallen</u>                                 | TX                      | 78504                               | Amount of Each Receipt this Period                              |
|                          | FEC ID number of contributing                  | С                       |                                     | 139.77  |
|                          | federal political committee.                   |                         |                                     |   |
|                          | Name of Employer                               | Occupation              | า                                   | contribution  |
|                          |  |                         |                                     |   |
|                          |  |                         | Year-to-Date ▼                      |   |
|                          | Primary General Other (specify) ▼              |                         | 915.95                              |   |
|                          |  | 0 0                     |                                     | 1   |
|                          |  |                         |                                     | 475.00  |
| s                        | UBTOTAL of Receipts This Page (optional)       |                         |                                     | 475.96  |
| Ţ                        | OTAL This Deviced (Instrument With Process)    |                         |                                     |   |
| 1 1                      | OTAL This Period (last page this line number   | uily)                   |                                     |   |

| SCHEDULE A (FEC Form 3X) |  |  | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 26 / 123                                  |
|--------------------------|--|--|-------------------------------------|---|
| ITEMIZED RECEIPTS        |  | or each category of the<br>Detailed Summary Page | (check only one)    X   11a         |   |
| Ar                       | ry information copied from such Reports and Sta<br>for commercial purposes, other than using the n | tements may                                      | / not be sold or used by any perso  | on for the purpose of soliciting contributions                  |
| Oi                       |  | ame and add                                      | aress or any political committee to | Solicit contributions from Such committee.                      |
| $\rangle$                | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  |  |                                     |   |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Javier Cortinas   |  |                                     | Date of Receipt   |
|                          | Mailing Address 1400 Northgate   |  |                                     | 04 / 12 / 2007  |
|                          | City mcallen   | State<br>TX                                      | Zip Code<br>78504                   | Transaction ID: SA11A1.6330  Amount of Each Receipt this Period |
|                          | FEC ID number of contributing federal political committee.   | C  |                                     | 195.67  |
|                          | Name of Employer self-employed   | Occupation physician                             |                                     | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate  | e Year-to-Date ▼ 721.97             |   |
| В.                       | Full Name (Last, First, Middle Initial) Javier Cortinas  |  |                                     | Date of Receipt   |
|                          | Mailing Address 1400 Northgate   |  |                                     | 05 11 2007  |
|                          | City   | State  | Zip Code                            | Transaction ID: SA11A1.6454                                     |
|                          | mcallen  | TX   | 78504                               | Amount of Each Receipt this Period                              |
|                          | FEC ID number of contributing federal political committee.   | C  |                                     | 206.47  |
|                          | Name of Employer self-employed   | Occupation physiciar                             |                                     | contribution  |
|                          | Receipt For:   | Aggregate  | e Year-to-Date ▼                    |   |
|                          | Primary General Other (specify) ▼  |  | 928.44                              |   |
| <u>с</u> .               | Full Name (Last, First, Middle Initial)<br>Javier Cortinas   |  |                                     | Date of Receipt   |
|                          | Mailing Address 1400 Northgate   |  |                                     | 06 15 2007  |
|                          | City   | State  | Zip Code                            | Transaction ID: SA11A1.6580                                     |
|                          | mcallen  | TX   | 78504                               | Amount of Each Receipt this Period                              |
|                          | FEC ID number of contributing federal political committee.   | C  |                                     | 167.19  |
|                          | Name of Employer self-employed   | Occupation physician                             | 1                                   | Contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate  | e Year-to-Date ▼<br>1095.63         |   |
| s                        | UBTOTAL of Receipts This Page (optional)   |  |                                     | 569.33  |
| Т                        | OTAL This Period (last page this line number or  | าly)   |                                     |   |

| SCHEDULE A (FEC Form 3X) |   |                       | Use separate schedule(s)  | FOR LINE NUMBER: PAGE 27 / 123   |
|--------------------------|---|-----------------------|---|--|
|                          | EMIZED RECEIPTS   |                       | or each category of the Detailed Summary Page                           | (check only one)  X 11a 11b 11c 12  13 14 15 16 17   |
| Ar                       | by information copied from such Reports and State for commercial purposes, other than using the n | tements may           | not be sold or used by any perso<br>dress of any political committee to | n for the purpose of soliciting contributions  |
| Š                        | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   | and date              | arooo or ary pointed committee to                                       | CONTRACTOR TO THE CONTRACTOR OF THE CONTRACTOR O |
| Α.                       | Full Name (Last, First, Middle Initial) David Deanda  Mailing Address 2408 Dorado  City           | State                 | Zip Code  | Date of Receipt    M   |
|                          | mission   | TX                    | 78574   | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.  | C                     |   | 250.00   |
|                          | Name of Employer self-employed  | Occupation private in | vestor  | contribution   |
|                          | Receipt For: Primary General Other (specify)  | Aggregate             | e Year-to-Date ▼<br>1000.00   |  |
| В.                       |   |                       |   | Date of Receipt  |
|                          | Mailing Address 2408 Dorado   |                       |   | 05 11 2007   |
|                          | City  | State                 | Zip Code  | Transaction ID: SA11A1.6457  |
|                          | mission   | TX                    | 78574   | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.  | C                     |   | 250.00 contribution  |
|                          | Name of Employer self-employed  | Occupation private in | vestor  | Contribution   |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate             | e Year-to-Date ▼<br>1250.00   |  |
| <u> </u>                 | Full Name (Last, First, Middle Initial) David Deanda  |                       |   | Date of Receipt  |
|                          | Mailing Address 2408 Dorado   | 2: :                  | 7:01  | 06 15 2007   |
|                          | City<br>mission   | State<br>TX           | Zip Code<br>78574   | Transaction ID: SA11A1.6582  Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.  | C                     | 70374   | 250.00   |
|                          | Name of Employer self-employed  | Occupation private in | vestor  | contribution   |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate             | e Year-to-Date ▼<br>1500.00   |  |
| s                        | UBTOTAL of Receipts This Page (optional)  |                       | ······························  | 750.00   |
| Т                        | OTAL This Period (last page this line number or   | nly)                  |   |  |

| SCHEDULE A (FEC Form 3X) |  |                            | Use separate schedule(s)  | FOR LINE NUMBER:   | PAGE 28 / 123                      |
|--------------------------|--|----------------------------|---|--|------------------------------------|
|                          | EMIZED RECEIPTS  |                            | or each category of the  Detailed Summary Page                          | (check only one)  X 11a 11b                                    | 11c  12                            |
|                          |  |                            |   | 13 14  | 15 16 17                           |
| Ar<br>or                 | ny information copied from such Reports and Stat<br>for commercial purposes, other than using the na | tements may<br>ame and add | not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting solicit contributions from su | ng contributions<br>uch committee. |
|                          | NAME OF COMMITTEE (In Full)  |                            |   |  |                                    |
|                          | BORDER HEALTH FEDERAL PAC  |                            |   |  |                                    |
| Α.                       | Full Name (Last, First, Middle Initial) Jorge De La Garza  |                            |   | Date of Receipt  |                                    |
|                          | Mailing Address 120 Condor   |                            |   | M M / D D / 1 2  | 2007                               |
|                          | City   | State                      | Zip Code  | Transaction ID: SA1  | 1A1.6334                           |
|                          | mcallen  | TX                         | 78504   | Amount of Each Rece  | eipt this Period                   |
|                          | FEC ID number of contributing federal political committee.   | C                          |   |  | 250.00                             |
|                          | Name of Employer self-employed   | Occupation physiciar       |   | contribution   |                                    |
|                          | Receipt For:   | Aggregate                  | Year-to-Date ▼  |  |                                    |
|                          | Primary General Other (specify) ▼  | 0 0                        | 1000.00   |  |                                    |
| В.                       | Full Name (Last, First, Middle Initial) Jorge De La Garza  |                            |   | Date of Receipt  |                                    |
|                          | Mailing Address 120 Condor   |                            |   | 0 5 / D D D  | 2007                               |
|                          | City   | State                      | Zip Code  | Transaction ID: SA1  | 1A1.6456                           |
|                          | mcallen  | TX                         | 78504   | Amount of Each Rece  | eipt this Period                   |
|                          | FEC ID number of contributing federal political committee.   | C                          |   |  | 250.00                             |
|                          | Name of Employer self-employed   | Occupation physician       |   | contribution   |                                    |
|                          | Receipt For:   |                            | e Year-to-Date ▼  |  |                                    |
|                          | Primary General Other (specify) ▼  |                            | 1250.00   |  |                                    |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Jorge De La Garza  |                            |   | Date of Receipt  |                                    |
|                          | Mailing Address 120 Condor   |                            |   | 0 6 1 5  | 2007                               |
|                          | City   | State                      | Zip Code  | Transaction ID: SA1  | 1A1.6583                           |
|                          | mcallen  | TX                         | 78504   | Amount of Each Rece  | eipt this Period                   |
|                          | FEC ID number of contributing federal political committee.   | C                          |   |  | 250.00                             |
|                          | Name of Employer self-employed   | Occupation physician       |   | contribution   |                                    |
|                          | Receipt For:   | Aggregate                  | e Year-to-Date ▼  | _  |                                    |
|                          | Primary General Other (specify) ▼  |                            | 1500.00   |  |                                    |
| s                        | UBTOTAL of Receipts This Page (optional)   |                            |   |  | 750.00                             |
| T                        | OTAL This Period (last page this line number on  | nly)                       | ······································                                  |  |                                    |

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|                          |  |                          |   | _   |
|--------------------------|--|--------------------------|---|---|
| SCHEDULE A (FEC Form 3X) |  | Use separate schedule(s) |   | FOR LINE NUMBER: PAGE 29 / 123  |
| ITEMIZED RECEIPTS        |  |                          | or each category of the   | (check only one)  |
|                          |  |                          | Detailed Summary Page   | X 11a   11b   11c   12  |
|                          |  |                          | 2 otaliou cullinaly i age   | 13 14 15 16 17  |
| Ar                       | ny information copied from such Reports and Sta<br>for commercial purposes, other than using the n | tements may              | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
|                          | NAME OF COMMITTEE (In Full)  |                          |   |   |
| $ \rangle$               | BORDER HEALTH FEDERAL PAC  |                          |   |   |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Alberto Duran   |                          |   | Date of Receipt   |
|                          | Mailing Address 1615 Palazzo   |                          |   | 04 12 2007  |
|                          | City   | State                    | Zip Code  | Transaction ID: SA11A1.6336   |
|                          | mission  | TX                       | 78572   | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.   | C                        |   | 250.00  |
|                          | Name of Employer selfemployed  | Occupation physician     |   | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                | e Year-to-Date ▼<br>1000.00   |   |
| В.                       | Full Name (Last, First, Middle Initial) Alberto Duran  |                          |   | Date of Receipt   |
|                          | Mailing Address 1615 Palazzo   |                          |   | 05 11 2007  |
|                          | City   | State                    | Zip Code  | Transaction ID: SA11A1.6458   |
|                          | mission  | TX                       | 78572   | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.   | C                        |   | 250.00  |
|                          | Name of Employer selfemployed  | Occupation physician     |   | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                | e Year-to-Date ▼<br>1250.00   |   |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Alberto Duran  |                          |   | Date of Receipt   |
|                          | Mailing Address 1615 Palazzo   |                          |   | 0 6 1 5 2 0 0 7   |
|                          | City   | State                    | Zip Code  | Transaction ID: SA11A1.6584   |
|                          | mission  | TX                       | 78572   | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.   | C                        |   | 250.00  |
|                          | Name of Employer selfemployed  | Occupation physician     |   | contribution  |
|                          | Receipt For:   | Aggregate                | e Year-to-Date ▼  | 7   |
|                          | Primary General Other (specify) ▼  |                          | 1500.00   |   |
| S                        | UBTOTAL of Receipts This Page (optional)   |                          |   | 750.00  |
| ıĭ                       |  |                          |   |   |

TOTAL This Period (last page this line number only) .....

|            | EMIZED RECEIPTS   |                      | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:   PAGE 30 / 123   (check only one)             |  |  |  |
|------------|---|----------------------|--|---|--|--|--|
| Ar         | ny information copied from such Reports and Si<br>for commercial purposes, other than using the | tatements may        | not be sold or used by any pers<br>dress of any political committee to | on for the purpose of soliciting contributions                  |  |  |  |
|            | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |                      |  |   |  |  |  |
| Α.         | Full Name (Last, First, Middle Initial)<br>Kotthegal Eshwar                                     |                      |  | Date of Receipt   |  |  |  |
|            | Mailing Address 108 Yellow Hammer   |                      |  | 05 11 2007  |  |  |  |
|            | City  | State                | Zip Code   | Transaction ID: SA11A1.6459                                     |  |  |  |
|            | mcallen  FEC ID number of contributing federal political committee.                             | C                    | 78504  | Amount of Each Receipt this Period  50.00                       |  |  |  |
|            | Name of Employer selfemployed   | Occupation physician |  | contribution  |  |  |  |
|            | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>250.00   |   |  |  |  |
| В.         | Full Name (Last, First, Middle Initial)<br>Kotthegal Eshwar                                     |                      |  | Date of Receipt   |  |  |  |
|            | Mailing Address 108 Yellow Hammer   |                      | 7:01   | 06 15 2007  |  |  |  |
|            | City<br>mcallen   | State<br>TX          | Zip Code<br>78504  | Transaction ID: SA11A1.6585  Amount of Each Receipt this Period |  |  |  |
|            | FEC ID number of contributing federal political committee.                                      | C                    | 7,000  | 50.00   |  |  |  |
|            | Name of Employer selfemployed   | Occupation physician |  | contribution  |  |  |  |
|            | Receipt For:  Primary  General  Other (specify) ▼   | Aggregate            | e Year-to-Date ▼ 300.00  |   |  |  |  |
| <u>С</u> . | Full Name (Last, First, Middle Initial)<br>Antonio Esparza                                      |                      |  | Date of Receipt   |  |  |  |
|            | Mailing Address 136 W. Yucca  |                      |  | 04 12 2007  |  |  |  |
|            | City<br>mcallent  | State<br>TX          | Zip Code<br>78504  | Transaction ID: SA11A1.6338  Amount of Each Receipt this Period |  |  |  |
|            | FEC ID number of contributing federal political committee.                                      | C                    | 70007  | 250.00  |  |  |  |
|            | Name of Employer selfemployed   | Occupation physician |  | contribution  |  |  |  |
|            | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼ 1000.00   |   |  |  |  |
| s          | UBTOTAL of Receipts This Page (optional)  |                      |  | 350.00  |  |  |  |
| Т          | TOTAL This Period (last page this line number only)   |                      |  |   |  |  |  |

| SCHEDULE A (FEC Form 3X) |  |                                | Use separate schedule(s)                      | FOR LINE NUMBER: PAGE 31 / 123  |
|--------------------------|--|--------------------------------|---|---|
|                          | EMIZED RECEIPTS  |                                | or each category of the Detailed Summary Page | (check only one)  X 11a 11b 11c 12 13 14 15 16 17   |
| Ar                       | ny information copied from such Reports and Sta<br>for commercial purposes, other than using the r   | atements may                   | y not be sold or used by any person           | n for the purpose of soliciting contributions   |
| Š                        | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  | iamo uno doc                   | arooo or ary pointed committee to             | CONTRACTOR NOT CONTINUED.   |
| Α.                       | Full Name (Last, First, Middle Initial) Antonio Esparza  Mailing Address 136 W. Yucca  City mcallent  FEC ID number of contributing federal political committee. | State<br>TX                    | Zip Code<br>78504                             | Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: SA11A1.6460  Amount of Each Receipt this Period  250.00  contribution |
|                          | Name of Employer selfemployed  Receipt For:  Primary General  Other (specify) ▼  | Occupation physician Aggregate |   |   |
| В.                       | Full Name (Last, First, Middle Initial) Antonio Esparza  Mailing Address 136 W. Yucca  |                                |   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|                          | City   | State                          | Zip Code                                      | Transaction ID: SA11A1.6586   |
|                          | mcallent FEC ID number of contributing federal political committee.  | C                              | 78504   | Amount of Each Receipt this Period  250.00  contribution  |
|                          | Name of Employer selfemployed  Receipt For:  Primary General Other (specify) ▼   | Occupation physician Aggregate |   | Contribution  |
| C.                       | Full Name (Last, First, Middle Initial) Antonio Falcon Mailing Address 2768 Pharmacy Road  |                                |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|                          | City rio grande city   | State<br>TX                    | Zip Code<br>78582                             | Transaction ID: SA11A1.6340  Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.   | C                              | 7002  | 250.00  |
|                          | Name of Employer self-employed  Receipt For:  Primary General  Other (specify) ▼   | Occupation physician Aggregate |   | contribution  |
| s                        | UBTOTAL of Receipts This Page (optional)   |                                |   | 750.00  |
| т                        | OTAL This Period (last page this line number o   | nly)                           |   |   |

| SCHEDULE A (FEC Form 3X) |   |                      | Use separate schedule(s)   | FOR LINE NUMBER: PAGE 32 / 123                                  |    |
|--------------------------|---|----------------------|--|---|----|
|                          | EMIZED RECEIPTS   |                      | or each category of the Detailed Summary Page  | (check only one)    X   11a                                     | 17 |
| Ar                       | ly information copied from such Reports and St<br>for commercial purposes, other than using the | atements may         | not be sold or used by any perso   | on for the purpose of soliciting contributions                  |    |
|                          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |                      | and the second s |   |    |
| Α.                       | Full Name (Last, First, Middle Initial) Antonio Falcon  Mailing Address 2768 Pharmacy Road      |                      |  | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y    |    |
|                          | City<br>rio grande city   | State<br>TX          | Zip Code<br>78582  | Transaction ID: SA11A1.6462  Amount of Each Receipt this Period |    |
|                          | FEC ID number of contributing federal political committee.                                      | C                    |  | 250.00  |    |
|                          | Name of Employer self-employed  | Occupation physician |  | contribution  |    |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>1250.00  |   |    |
| В.                       | Full Name (Last, First, Middle Initial) Antonio Falcon  |                      |  | Date of Receipt   | _  |
|                          | Mailing Address 2768 Pharmacy Road  | 06 15 2007           |  |   |    |
|                          | City  | State                | Zip Code   | Transaction ID: SA11A1.6588                                     |    |
|                          | rio grande city   | TX                   | 78582  | Amount of Each Receipt this Period                              |    |
|                          | FEC ID number of contributing federal political committee.                                      | C                    |  | 250.00  |    |
|                          | Name of Employer self-employed  | Occupation physiciar | 1  | contribution  |    |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>1500.00  | ]   |    |
| C.                       | Full Name (Last, First, Middle Initial)<br>Maria Elena Falcon                                   |                      |  | Date of Receipt   |    |
|                          | Mailing Address 2212 Westway  City  | State                | Zip Code   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                     |    |
|                          | mcallen   | TX                   | 78504  | Amount of Each Receipt this Period                              |    |
|                          | FEC ID number of contributing federal political committee.                                      | C                    | 7000+  | 250.00  |    |
|                          | Name of Employer self-employed  | Occupation physician | 1  | - contribution  |    |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>1000.00  |   |    |
| s                        | UBTOTAL of Receipts This Page (optional)  |                      |  | 750.00  | ]  |
| Т                        | OTAL This Period (last page this line number of   | only)                |  |   |    |

| S                 | CHEDULE A (FEC Form 3X)   |                           | Llea coparata cabadula(s)   | FOR LINE NUMBER: PAGE 33 / 123  |
|-------------------|---|---------------------------|---|---|
| ITEMIZED RECEIPTS |   |                           | Use separate schedule(s)<br>or each category of the                 | (check only one)  |
| •••               | EIVIIZED RECEIP 13  |                           | Detailed Summary Page   | X 11a 11b 11c 12  |
|                   |   |                           |   | 13 14 15 16 17  |
| Ar<br>or          | ny information copied from such Reports and State<br>for commercial purposes, other than using the na | ements may<br>me and ado  | not be sold or used by any persolress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Λ                 | NAME OF COMMITTEE (In Full)   |                           |   |   |
|                   | BORDER HEALTH FEDERAL PAC   |                           |   |   |
| Α.                | Full Name (Last, First, Middle Initial)<br>Maria Elena Falcon   |                           |   | Date of Receipt   |
|                   | Mailing Address 2212 Westway  |                           |   | 05 11 2007  |
|                   | City  | State                     | Zip Code  | Transaction ID: SA11A1.6461   |
|                   | mcallen   | TX                        | 78504   | Amount of Each Receipt this Period  |
|                   | FEC ID number of contributing federal political committee.  | C                         |   | 250.00  |
|                   | Name of Employer self-employed  | Occupation physician      |   | contribution  |
|                   | Receipt For:  |                           | Year-to-Date ▼  |   |
|                   | Primary General   |                           | 1050.00   | 1   |
|                   | Other (specify) ▼   | 0 0                       | 1250.00   |   |
| В.                | Full Name (Last, First, Middle Initial) Maria Elena Falcon  |                           |   | Date of Receipt   |
| ٥.                | Mailing Address 2212 Westway  |                           |   | M M / D D / Y Y Y Y   |
|                   |   | 06 15 2007                |   |   |
|                   | City  | State                     | Zip Code  | Transaction ID: SA11A1.6587   |
|                   | mcallen   | TX                        | 78504   | Amount of Each Receipt this Period  |
|                   | FEC ID number of contributing federal political committee.  | С                         |   | 250.00  |
|                   | Name of Employer self-employed  | Occupation                |   | contribution  |
|                   |   | physician                 |   |   |
|                   | Receipt For:  | Aggregate                 | Year-to-Date ▼  |   |
|                   | Primary General Other (specify) ▼   |                           | 1500.00   |   |
| <u> </u>          | Full Name (Last, First, Middle Initial) Alberto Felici  |                           |   | Date of Receipt   |
| ٥.                | Mailing Address 2309 W. Greenbriar Squa   | are                       |   | M M / D D / Y Y Y Y   |
|                   |   | 2505 W. Greenbrial Square |   |   |
|                   | City  | State                     | Zip Code  | Transaction ID: SA11A1.6341   |
|                   | mcallen   | TX                        | 78504   | Amount of Each Receipt this Period  |
|                   | FEC ID number of contributing federal political committee.  | C                         |   | 163.57  |
|                   | Name of Employer self-employed  | Occupation physician      |   | contribution  |
|                   | Receipt For:  | <u> </u>                  | Year-to-Date ▼  |   |
|                   | Primary General   | 00 0                      |   | 7   |
|                   | Other (specify) ▼   |                           | 603.53  |   |
| s                 | UBTOTAL of Receipts This Page (optional)  |                           |   | 663.57  |
| $\vdash$          |   |                           |   | -   |
| Ιт                | OTAL This Period (last page this line number onl  | v)                        |   |   |

| S        | CHEDULE A (FEC Form 3X)  |                      | Llea coparata cabadula(s)   | FOR LINE NUMBER: PAGE 34 / 123   |  |  |  |
|----------|--|----------------------|---|--|--|--|--|
|          | EMIZED RECEIPTS  |                      | Use separate schedule(s)<br>or each category of the                             | (check only one)   |  |  |  |
| •••      | LIMIZED RECEIP 13  |                      | Detailed Summary Page   | X   11a   11b   11c   12   |  |  |  |
| Δ        | information coming from such Department and Ca   |                      |   | 13 14 15 16 17   |  |  |  |
| or       | y information copied from such Reports and St<br>for commercial purposes, other than using the | name and ado         | rnot be sold or used by any personal distribution of any political committee to | on for the purpose of soliciting contributions as solicit contributions from such committee. |  |  |  |
|          | NAME OF COMMITTEE (In Full)  |                      |   |  |  |  |  |
| $\angle$ | BORDER HEALTH FEDERAL PAC  |                      |   |  |  |  |  |
| A.       | Full Name (Last, First, Middle Initial)<br>Alberto Felici                                      |                      |   | Date of Receipt  |  |  |  |
|          | Mailing Address 2309 W. Greenbriar Sc  | luare                |   | 05 11 7 2007   |  |  |  |
|          | City   | State                | Zip Code  | Transaction ID: SA11A1.6463  |  |  |  |
|          | mcallen  | TX                   | 78504   | Amount of Each Receipt this Period   |  |  |  |
|          | FEC ID number of contributing federal political committee.                                     | C                    |   | 172.60   |  |  |  |
|          | Name of Employer self-employed   | Occupation physician |   | contribution   |  |  |  |
|          | Receipt For:   |                      | Year-to-Date ▼  |  |  |  |  |
|          | Primary General  | 00 0                 |   | 7  |  |  |  |
|          | Other (specify) ▼  |                      | 776.13  |  |  |  |  |
| В.       | Full Name (Last, First, Middle Initial)<br>Alberto Felici                                      |                      |   | Date of Receipt  |  |  |  |
|          | Mailing Address 2309 W. Greenbriar Sc  | 0 6 1 5 2 0 0 7      |   |  |  |  |  |
|          | City   | State                | Zip Code  | Transaction ID: SA11A1.6589  |  |  |  |
|          | mcallen  | TX                   | 78504   | Amount of Each Receipt this Period   |  |  |  |
|          | FEC ID number of contributing federal political committee.                                     | C                    |   | 139.76   |  |  |  |
|          | Name of Employer self-employed   | Occupation physician |   | contribution   |  |  |  |
|          | Receipt For:   |                      | Year-to-Date ▼  |  |  |  |  |
|          | Primary General  |                      | 915.89  | 1  |  |  |  |
|          | Other (specify)  | 0 0                  | 913.09  |  |  |  |  |
| C.       | Full Name (Last, First, Middle Initial) Marco Flores   |                      |   | Date of Receipt  |  |  |  |
|          | Mailing Address 320 Primrose   |                      |   | M M / D D / Y Y Y Y  |  |  |  |
|          | City   | State                | Zip Code  | 0 4 1 2 2 0 0 7  Transaction ID: SA11A1.6342   |  |  |  |
|          | mcallen  | TX                   | 78504   | Amount of Each Receipt this Period   |  |  |  |
|          | FEC ID number of contributing  |                      | 1 1 1 1 1   |  |  |  |  |
|          | federal political committee.   | C                    |   | 250.00   |  |  |  |
|          | Name of Employer self-employed   | Occupation physician |   | contribution   |  |  |  |
|          | Receipt For:   | Aggregate            | Year-to-Date ▼  |  |  |  |  |
|          | Primary General Other (specify) ▼  |                      | 1000.00   | ]  |  |  |  |
| <u> </u> | URTOTAL of Receipts This Page (optional)   |                      |   | 562.36   |  |  |  |
| ۲        | SUBTOTAL of Receipts This Page (optional)  |                      |   |  |  |  |  |
| T        | OTAL This Period (last page this line number of  | only)                |   |  |  |  |  |

| S           | CHEDULE A (FEC Form 3X)  |                      | Llea coparata cabadula(s)   | FOR LINE NUMBER: PAGE 35 / 123   |
|-------------|--|----------------------|---|--|
|             | EMIZED RECEIPTS  |                      | Use separate schedule(s)<br>or each category of the                 | (check only one)   |
| •••         | LIMIZED RECEIP 13  |                      | Detailed Summary Page   | X   11a   11b   11c   12   |
| Δ           | information conicd from such Deposits and O  |                      |   | 13 14 15 16 17   |
| or          | y information copied from such Reports and Si<br>for commercial purposes, other than using the | name and ado         | rnot be sold or used by any personers of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |
| $\setminus$ | NAME OF COMMITTEE (In Full)  |                      |   |  |
|             | BORDER HEALTH FEDERAL PAC  |                      |   |  |
| A.          | Full Name (Last, First, Middle Initial) Marco Flores   |                      |   | Date of Receipt  |
|             | Mailing Address 320 Primrose   |                      |   | 05 11 2007   |
|             | City   | State                | Zip Code  | Transaction ID: SA11A1.6464  |
|             | mcallen  | TX                   | 78504   | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing federal political committee.                                     | C                    |   | 250.00   |
|             | Name of Employer self-employed   | Occupation physician |   | contribution   |
|             | Receipt For:   | 1                    | Year-to-Date ▼  |  |
|             | Primary General  |                      | 1250.00   | 7  |
|             | Other (specify) ▼  | 0 0                  | 1230.00   |  |
| В.          | Full Name (Last, First, Middle Initial)<br>Marco Flores  |                      |   | Date of Receipt  |
|             | Mailing Address 320 Primrose   |                      |   | 06 15 2007   |
|             | City   | State                | Zip Code  | Transaction ID: SA11A1.6590  |
|             | mcallen  | TX                   | 78504   | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing federal political committee.                                     | C                    |   | 250.00   |
|             | Name of Employer self-employed   | Occupation physician |   | contribution   |
|             | Receipt For:   | Aggregate            | Year-to-Date ▼  |  |
|             | Primary General  |                      | 1500.00   | 7  |
|             | Other (specify)  | 0 0                  | 1300.00   |  |
| C.          | Full Name (Last, First, Middle Initial)<br>Eugenio Galindo                                     |                      |   | Date of Receipt  |
|             | Mailing Address 5936 N. Cynthia  |                      |   | 0 4 1 2 2 0 0 7  |
|             | City   | State                | Zip Code  | Transaction ID: SA11A1.6343  |
|             | <u>mcallen</u>   | TX                   | 78504   | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing  |                      |   | 250.00   |
|             | federal political committee.   | C                    |   |  |
|             | Name of Employer self-employed   | Occupation physician |   | contribution   |
|             | Receipt For:   | Aggregate            | Year-to-Date ▼  |  |
|             | Primary General Other (specify) ▼  | 0 0                  | 1000.00   |  |
|             | IJPTOTAL of Descripts This Dags (antisms)  |                      |   | 750.00   |
| L           | UBTOTAL of Receipts This Page (optional)   |                      |   |  |
| T           | OTAL This Period (last page this line number of  | only)                |   |  |

|             | CHEDULE A (FEC Form 3X)   | Use separate schedule(s)   | (check only one)   |
|-------------|---|--|--|
| IT          | EMIZED RECEIPTS   | or each category of the<br>Detailed Summary Page                                   | X 11a 11b 11c 12<br>13 14 15 16 17   |
| Ar<br>or    | ny information copied from such Reports and Statements<br>for commercial purposes, other than using the name an | s may not be sold or used by any person<br>d address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\setminus$ | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |  |  |
| Α.          | Full Name (Last, First, Middle Initial) Eugenio Galindo   |  | Date of Receipt  |
|             | Mailing Address 5936 N. Cynthia   |  | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|             | City Stat   | '  | Transaction ID: SA11A1.6465  |
|             | mcallen TX  | 78504  | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing federal political committee.  |  | 250.00   |
|             | Name of Employer Self-employed Occur phys   |  | contribution   |
|             |   | egate Year-to-Date ▼<br>1250.00  |  |
| —<br>В.     | Full Name (Last, First, Middle Initial) Eugenio Galindo   |  | Date of Receipt  |
|             | Mailing Address 5936 N. Cynthia   |  | 0 6 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|             | City Stat   | ' '  | Transaction ID: SA11A1.6591  |
|             | mcallen TX  | 78504  | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing federal political committee.  |  | 250.00   |
|             | Name of Employer Self-employed Phys   | pation<br>ician  | contribution   |
|             |   | egate Year-to-Date ▼   |  |
|             | Primary General Other (specify) ▼   | 1500.00  |  |
| <u> </u>    | Full Name (Last, First, Middle Initial) Elvin Garcia  |  | Date of Receipt  |
|             | Mailing Address 2800 Santa Teresa   |  | 04 12 2007   |
|             | City Stat   | '  | Transaction ID: SA11A1.6344  |
|             | mission TX  | 78572  | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing federal political committee.  |  | 250.00   |
|             | Name of Employer Self-employed Occur phys   | pation<br>ician  | contribution   |
|             |   | egate Year-to-Date ▼   |  |
|             | Primary General Other (specify) ▼   | 1000.00  |  |
| s           | UBTOTAL of Receipts This Page (optional)  | <b>.</b>   | 750.00   |
| Н           | OTAL This Period (last nage this line number only)  |  |  |

|          | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS   |                         | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:   PAGE 37/123   (check only one)               |
|----------|---|-------------------------|--|---|
| Ar       | ny information copied from such Reports and State<br>for commercial purposes, other than using the na | ements may              | not be sold or used by any persolress of any political committee to    | on for the purpose of soliciting contributions                  |
|          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |                         |  |   |
| Α.       | Full Name (Last, First, Middle Initial)<br>Elvin Garcia   |                         |  | Date of Receipt   |
|          | Mailing Address 2800 Santa Teresa   |                         |  | 05 11 2007  |
|          | City<br>mission   | State<br>TX             | Zip Code<br>78572  | Transaction ID: SA11A1.6466  Amount of Each Receipt this Period |
|          | FEC ID number of contributing federal political committee.  | C                       |  | 250.00  |
|          | Name of Employer self-employed  | Occupation<br>physician |  | contribution  |
|          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate               | Year-to-Date ▼<br>1250.00  |   |
| В.       | Full Name (Last, First, Middle Initial)<br>Elvin Garcia   |                         |  | Date of Receipt   |
|          | Mailing Address 2800 Santa Teresa   |                         |  | 06 15 2007  |
|          | City<br>mission   | State<br>TX             | Zip Code<br>78572  | Transaction ID: SA11A1.6592                                     |
|          | FEC ID number of contributing federal political committee.  | C                       | 70372  | Amount of Each Receipt this Period  250.00                      |
|          | Name of Employer self-employed  | Occupation physician    |  | — contribution  |
|          | Receipt For:  Primary  General  Other (specify) ▼   | Aggregate               | Year-to-Date ▼<br>1500.00  |   |
| <u> </u> | Full Name (Last, First, Middle Initial) Rene Garza  |                         |  | Date of Receipt   |
|          | Mailing Address 5404 N. 1st street  |                         |  | 0 4 D D / Y Y Y Y Y Y 1 2 0 0 7                                 |
|          | City  | State                   | Zip Code   | Transaction ID: SA11A1.6346                                     |
|          | mcallen  FEC ID number of contributing federal political committee.                                   | C                       | 78504  | Amount of Each Receipt this Period  250.00                      |
|          | Name of Employer selfemployed   | Occupation private in   |  | contribution  |
|          | Receipt For:  Primary  General  Other (specify) ▼   | Aggregate               | Year-to-Date ▼ 1000.00   |   |
| s        | UBTOTAL of Receipts This Page (optional)  |                         |  | 750.00  |
| Т        | OTAL This Period (last page this line number onl  | y)                      |  |   |

| SCHEDULE A (FEC Form 3X) |  |                         | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 38 / 123   |
|--------------------------|--|-------------------------|-------------------------------------|--|
| ITEMIZED RECEIPTS        |  | or each category of the |                                     | (check only one)   |
| •••                      | LIMIZED RECEIL 13  | Detailed Summary Pag    |                                     | X 11a 11b 11c 12   |
| Δ                        | information conicd from such Deposits and Ci   |                         |                                     | 13 14 15 16 17   |
| or                       | y information copied from such Reports and Si<br>for commercial purposes, other than using the | name and add            | dress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |
|                          | NAME OF COMMITTEE (In Full)  |                         |                                     |  |
| $\angle$                 | BORDER HEALTH FEDERAL PAC  |                         |                                     |  |
| A.                       | Full Name (Last, First, Middle Initial) Rene Garza   |                         |                                     | Date of Receipt  |
|                          | Mailing Address 5404 N. 1st street   |                         |                                     | 05 11 7 2007   |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6468  |
|                          | mcallen  | TX                      | 78504                               | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | C                       |                                     | 250.00   |
|                          | Name of Employer selfemployed  | Occupation private in   |                                     | contribution   |
|                          | Receipt For:   |                         | Year-to-Date ▼                      |  |
|                          | Primary General  | 00 0                    |                                     | 7  |
|                          | Other (specify) ▼  | 0 0                     | 1250.00                             |  |
| В.                       | Full Name (Last, First, Middle Initial)<br>Rene Garza  |                         |                                     | Date of Receipt  |
|                          | Mailing Address 5404 N. 1st street   |                         |                                     | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6594  |
|                          | mcallen  | TX 78504                |                                     | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | C                       |                                     | 250.00   |
|                          | Name of Employer selfemployed  | Occupation private in   |                                     | contribution   |
|                          | Receipt For:   |                         | e Year-to-Date ▼                    |  |
|                          | Primary General  |                         | 1500.00                             | 7  |
|                          | Other (specify) ▼  |                         | 1500.00                             |  |
| C.                       | Full Name (Last, First, Middle Initial)<br>Lawrence Gelman                                     |                         |                                     | Date of Receipt  |
|                          | Mailing Address 3900 Sundown Drive   |                         |                                     | 04 12 2007   |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6347  |
|                          | mcallen  | TX                      | 78503                               | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | C                       |                                     | 250.00   |
|                          | Name of Employer selfemployed phy  Receipt For: Age  |                         |                                     | contribution   |
|                          |  |                         | e Year-to-Date ▼                    |  |
|                          | Primary General  |                         | 1000.00                             | 7  |
|                          | Other (specify) ▼  |                         | 1000.00                             |  |
| s                        | UBTOTAL of Receipts This Page (optional)   |                         |                                     | 750.00   |
| $\vdash$                 |  |                         | •                                   |  |
| T                        | OTAL This Period (last page this line number   | only)                   |                                     |  |

| S          | CHEDULE A (FEC Form 3X)   |  |                                     | FOR LINE NUMBER: PAGE 39 / 123                 |
|------------|---|--|-------------------------------------|--|
| •          |   | Use separate schedule(s) or each category of the |                                     | (check only one)                               |
| П          | EMIZED RECEIPTS   |  | Detailed Summary Page               | X 11a 11b 11c 12                               |
|            |   |  |                                     | 13 14 15 16 17                                 |
| Ar         | y information copied from such Reports and Sta<br>for commercial purposes, other than using the i | atements may                                     | not be sold or used by any person   | on for the purpose of soliciting contributions |
| or         |   | name and add                                     | Iress of any political committee to | o solicit contributions from such committee.   |
|            | NAME OF COMMITTEE (In Full)   |  |                                     |  |
| $ \rangle$ | BORDER HEALTH FEDERAL PAC   |  |                                     |  |
|            |   |  |                                     |  |
| Α.         | Full Name (Last, First, Middle Initial)<br>Lawrence Gelman  |  |                                     | Date of Receipt                                |
| Α.         | Mailing Address 3900 Sundown Drive  |  |                                     | <del>-</del>                                   |
|            | Walling Address 3900 Sundown Drive  |  |                                     | 05 11 2007                                     |
|            | City  | State  | Zip Code                            | Transaction ID: SA11A1.6469                    |
|            | mcallen   | TX   | 78503                               | Amount of Each Receipt this Period             |
|            | FEC ID number of contributing   |  |                                     |  |
|            | federal political committee.  | C  |                                     | 250.00   |
|            |   |  |                                     | contribution                                   |
|            | Name of Employer selfemployed   | Occupation                                       |                                     | Continuation                                   |
|            |   | physician  |                                     |  |
|            | Receipt For:  | Aggregate  | Year-to-Date ▼                      |  |
|            | Primary General   | ' '  | 1250.00                             |  |
|            | Other (specify)   | 1 1  |                                     | J  |
|            | Full Name (Last, First, Middle Initial)   |  |                                     |  |
| В.         | Lawrence Gelman   |  |                                     | Date of Receipt                                |
|            | Mailing Address 3900 Sundown Drive  |  |                                     | M M / D D / Y Y Y Y                            |
|            |   |  |                                     | 06 15 2007                                     |
|            | City  | State  | Zip Code                            | Transaction ID: SA11A1.6595                    |
|            | mcallen   | TX   | 78503                               | Amount of Each Receipt this Period             |
|            | FEC ID number of contributing   |  |                                     | 050.00   |
|            | federal political committee.  | C  |                                     | 250.00   |
|            | Name of Employer  | Occupation                                       |                                     | contribution                                   |
|            | Name of Employer selfemployed   | Occupation physician                             |                                     |  |
|            | Receipt For:  |  | Year-to-Date ▼                      |  |
|            | Primary General   | Aggregate  | Teal-to-Date V                      | 1  |
|            | Other (specify)   |  | 1500.00                             |  |
|            | (-p // •  |  |                                     | 1  |
| _          | Full Name (Last, First, Middle Initial)   |  |                                     |  |
| C.         | Robert Genovese   |  |                                     | Date of Receipt                                |
|            | Mailing Address 2208 Summer Breeze  |  |                                     | M M / D D / Y Y Y Y                            |
|            | 0"  |  | 7' 0 1                              | 04 12 2007                                     |
|            | City  | State  | Zip Code                            | Transaction ID: SA11A1.6348                    |
|            | mission   | TX   | 78572                               | Amount of Each Receipt this Period             |
|            | FEC ID number of contributing   | С  |                                     | 200.00   |
|            | federal political committee.  |  |                                     |  |
|            | Name of Employer  | Occupation                                       | 1                                   | contribution                                   |
|            | selfemployed  | physician  |                                     |  |
|            | Receipt For:  | Aggregate  | Year-to-Date ▼                      |  |
|            | Primary General   | -  | 707.70                              | 1  |
|            | Other (specify) ▼   |  | 797.73                              |  |
| _          |   |  |                                     |  |
|            |   |  |                                     | 700.00   |
| s          | UBTOTAL of Receipts This Page (optional)  |  |                                     | 700.00   |
| $\vdash$   |   |  |                                     |  |

| SCHEDULE A (FEC Form 3X) |  | Llas sanarata sahadula(a) |                                     | FOR LINE NUMBER: PAGE 40 / 123               |  |
|--------------------------|--|---------------------------|-------------------------------------|--|--|
| ITEMIZED RECEIPTS        |  | or each category of the   |                                     | (check only one)                             |  |
| •••                      |  |                           | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17      |  |
| Δr                       | y information copied from such Reports and Si              | tatements may             | y not he sold or used by any ners   |  |  |
| or                       | for commercial purposes, other than using the              | name and add              | dress of any political committee to | o solicit contributions from such committee. |  |
| $\setminus$              | NAME OF COMMITTEE (In Full)                                |                           |                                     |  |  |
| $ \rangle$               | BORDER HEALTH FEDERAL PAC                                  |                           |                                     |  |  |
| <u></u>                  | Full Name (Last, First, Middle Initial)                    |                           |                                     |  |  |
| A.                       | Robert Genovese  |                           |                                     | Date of Receipt                              |  |
|                          | Mailing Address 2208 Summer Breeze                         |                           |                                     | 05 11 2007                                   |  |
|                          | City   | State                     | Zip Code                            | Transaction ID: SA11A1.6470                  |  |
|                          | mission  | TX                        | 78572                               | Amount of Each Receipt this Period           |  |
|                          | FEC ID number of contributing                              |                           | 10012                               |  |  |
|                          | federal political committee.                               | C                         |                                     | 200.00                                       |  |
|                          | Name of Employer selfemployed                              | Occupation                | <u> </u>                            | contribution                                 |  |
|                          | selfemployed   | physician                 | 1                                   |  |  |
|                          | Receipt For:   | Aggregate                 | e Year-to-Date ▼                    |  |  |
|                          | Primary General  |                           | 997.73                              | 1  |  |
|                          | Other (specify) ▼  | 0 0                       |                                     | 1  |  |
| _                        | Full Name (Last, First, Middle Initial)                    |                           |                                     |  |  |
| В.                       | Robert Genovese  |                           |                                     | Date of Receipt                              |  |
|                          | Mailing Address 2208 Summer Breeze                         |                           |                                     | 06 15 2007                                   |  |
|                          | City   | State                     | Zip Code                            | Transaction ID: SA11A1.6596                  |  |
|                          | mission  | TX                        | 78572                               | Amount of Each Receipt this Period           |  |
|                          | FEC ID number of contributing                              | С                         |                                     | 200.00                                       |  |
|                          | federal political committee.                               |                           |                                     |  |  |
|                          | Name of Employer selfemployed                              | Occupation                |                                     | contribution                                 |  |
|                          |  | physician                 |                                     |  |  |
|                          | Receipt For:  Primary  General                             | Aggregate                 | e Year-to-Date ▼                    | -  |  |
|                          | Other (specify)  |                           | 1197.73                             |  |  |
|                          |  |                           |                                     |  |  |
| C.                       | Full Name (Last, First, Middle Initial) Alvaro Giraldo     |                           |                                     | Date of Receipt                              |  |
| ٠.                       | Mailing Address 106 W. Flamingo                            |                           |                                     | M M / D D / Y Y Y Y                          |  |
|                          |  |                           |                                     | 04 12 2007                                   |  |
|                          | City   | State                     | Zip Code                            | Transaction ID: SA11A1.6312                  |  |
|                          | mcallen  | TX                        | 78504                               | Amount of Each Receipt this Period           |  |
|                          | FEC ID number of contributing federal political committee. | C                         |                                     | 250.00                                       |  |
|                          | Name of Franksia   | 10                        |                                     | contribution                                 |  |
|                          | Name of Employer selfemployed                              | Occupation physician      |                                     |  |  |
|                          | Receipt For:   |                           | Year-to-Date ▼                      | _  |  |
|                          | Primary General  |                           |                                     | 1  |  |
|                          | Other (specify) ▼  | 0 0                       | 1000.00                             | 1  |  |
|                          |  |                           |                                     |  |  |
| s                        | UBTOTAL of Receipts This Page (optional)                   |                           |                                     | 650.00                                       |  |
|                          |  |                           | ·                                   |  |  |
| T                        | OTAL This Period (last page this line number               | only)                     |                                     |  |  |

| SCHEDULE A (FEC Form 3X) |  |                         |                                     | FOR LINE NUMBER: PAGE 41 / 123             |  |
|--------------------------|--|-------------------------|-------------------------------------|--|--|
|                          | •  |                         | Use separate schedule(s)            | (check only one)                           |  |
| ITEMIZED RECEIPTS        |  | or each category of the |                                     | X 11a 11b 11c 12                           |  |
|                          |  |                         | Detailed Summary Page               | 13 14 15 16 17                             |  |
| Δr                       | ny information copied from such Reports and St             | atements may            | y not he sold or used by any ners   |  |  |
| or                       | for commercial purposes, other than using the              | name and add            | dress of any political committee to | solicit contributions from such committee. |  |
|                          | NAME OF COMMITTEE (In Full)                                |                         |                                     |  |  |
| $ \rangle$               | BORDER HEALTH FEDERAL PAC                                  |                         |                                     |  |  |
|                          |  |                         |                                     |  |  |
|                          | Full Name (Last, First, Middle Initial)                    |                         |                                     |  |  |
| Α.                       | Alvaro Giraldo   |                         |                                     | Date of Receipt                            |  |
|                          | Mailing Address 106 W. Flamingo                            |                         |                                     | 05 11 2007                                 |  |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6437                |  |
|                          | mcallen  | TX                      | 78504                               | Amount of Each Receipt this Period         |  |
|                          |  | 1/                      | 70304                               | Amount of Each Receipt this Period         |  |
|                          | FEC ID number of contributing federal political committee. | C                       |                                     | 250.00                                     |  |
|                          | rederal political committee.                               |                         |                                     | contribution                               |  |
|                          | Name of Employer selfemployed                              | Occupation              | 1                                   | Contribution                               |  |
|                          |  | physician               |                                     |  |  |
|                          | Receipt For:   | Aggregate               | e Year-to-Date ▼                    |  |  |
|                          | Primary General  |                         | 1250.00                             | 1  |  |
|                          | Other (specify) ▼  | 0 0                     |                                     | 1  |  |
|                          | Full Name (Last, First, Middle Initial)                    |                         |                                     | _  |  |
| В.                       |  |                         |                                     | Date of Receipt                            |  |
|                          | Mailing Address 106 W. Flamingo                            |                         |                                     | M M / D D / Y Y Y Y                        |  |
|                          |  |                         |                                     | 06 15 2007                                 |  |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6563                |  |
|                          | mcallen  | TX                      | 78504                               | Amount of Each Receipt this Period         |  |
|                          | FEC ID number of contributing                              |                         |                                     | 250.00                                     |  |
|                          | federal political committee.                               | C                       |                                     | 250.00                                     |  |
|                          | Name of Employer   | Occupation              | <br>1                               | contribution                               |  |
|                          | selfemployed   | physician               |                                     |  |  |
|                          | Receipt For:   |                         | Year-to-Date ▼                      |  |  |
|                          | Primary General  |                         |                                     | 7  |  |
|                          | Other (specify)  |                         | 1500.00                             |  |  |
|                          |  |                         |                                     |  |  |
| _                        | Full Name (Last, First, Middle Initial) Ada Gonzalez       |                         |                                     | Date of Possint                            |  |
| C.                       |  |                         |                                     | Date of Receipt                            |  |
|                          | Mailing Address P.O. Box 9817                              |                         |                                     | 04 12 2007                                 |  |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6349                |  |
|                          | alamo  | TX                      | 78516                               | Amount of Each Receipt this Period         |  |
|                          | FEC ID number of contributing                              |                         |                                     | 000.00                                     |  |
|                          | federal political committee.                               | C                       |                                     | 236.88                                     |  |
|                          | Name of Employer   | Occupation              | 2                                   | contribution                               |  |
|                          | Name of Employer selfemployed                              | private in              |                                     |  |  |
|                          | Receipt For:   |                         | Year-to-Date <b>V</b>               | $\dashv$                                   |  |
|                          | Primary General  | , 1991 09410            |                                     | 7  |  |
|                          | Other (specify)  |                         | 874.03                              |  |  |
|                          |  |                         |                                     | 1  |  |
|                          |  |                         |                                     |  |  |
| s                        | UBTOTAL of Receipts This Page (optional)                   |                         |                                     | 736.88                                     |  |
| $\vdash$                 | 1  |                         | •                                   | -  |  |

|          | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS   |                     | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:   PAGE 42 / 123   (check only one)             |
|----------|---|---------------------|--|---|
| Ar       | by information copied from such Reports and Stateme<br>for commercial purposes, other than using the name | ents may            | not be sold or used by any perso                                       | on for the purpose of soliciting contributions                  |
| Š        | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   | una aac             | areas of any political committee to                                    | SOLOR SOLUTION TO THE SOLOR SOLUTION.                           |
| Α.       | Full Name (Last, First, Middle Initial)<br>Ada Gonzalez   |                     |  | Date of Receipt   |
|          | Mailing Address P.O. Box 9817   |                     |  | 05 11 7 2007  |
|          | •   | State<br>FX         | Zip Code<br>78516  | Transaction ID: SA11A1.6471  Amount of Each Receipt this Period |
|          | FEC ID number of contributing federal political committee.  |                     | 10010  | 249.95  |
|          | salfamplovad  | cupation            |  | contribution  |
|          | Receipt For:  Primary  General  Other (specify) ▼   | ggregate            | Year-to-Date ▼<br>1123.98  |   |
| В.       | Full Name (Last, First, Middle Initial)<br>Ada Gonzalez   |                     |  | Date of Receipt   |
|          | Mailing Address P.O. Box 9817   | N - 1 -             | 7'. 0.1  | 06 15 2007  |
|          | •   | State<br>FX         | Zip Code<br>78516  | Transaction ID: SA11A1.6597  Amount of Each Receipt this Period |
|          | FEC ID number of contributing federal political committee.  |                     | 70510  | 202.40  |
|          | salfamplovad  | cupation            |  | — contribution  |
|          | Receipt For:  Primary  General  Other (specify) ▼   | ggregate            | e Year-to-Date ▼<br>1326.38  |   |
| <u> </u> | Full Name (Last, First, Middle Initial) Alfredo Gonzalez  |                     |  | Date of Receipt   |
|          | Mailing Address 2305 Monaco Drive   |                     |  | 0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                     |
|          | •   | State<br>FX         | Zip Code<br>78574  | Transaction ID: SA11A1.6350  Amount of Each Receipt this Period |
|          | FEC ID number of contributing federal political committee.  |                     | 70374  | 146.60  |
|          | coltomologod  | cupation<br>ysiciar |  | contribution  |
|          | Receipt For:  Primary  General  Other (specify) ▼   | ggregate            | Year-to-Date ▼ 540.90  |   |
| s        | UBTOTAL of Receipts This Page (optional)  |                     |  | 598.95  |
| Т        | OTAL This Period (last page this line number only) .  |                     |  |   |

| IT         | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  |                       | Use separate schedule(s) or each category of the Detailed Summary Page    | FOR LINE NUMBER: PAGE 43 / 123 (check only one)  X 11a 11b 11c 12  13 14 15 16 17 |
|------------|--|-----------------------|---|---|
| or         | y information copied from such Reports and Sta<br>for commercial purposes, other than using the n<br>NAME OF COMMITTEE (In Full) | ame and add           | r not be sold or used by any perso<br>Iress of any political committee to | solicit contributions from such committee.  |
| $\rangle$  | BORDER HEALTH FEDERAL PAC  |                       |   |   |
| ۹.         | Full Name (Last, First, Middle Initial) Alfredo Gonzalez   |                       |   | Date of Receipt   |
|            | Mailing Address 2305 Monaco Drive  |                       |   | 05 11 7 2007  |
|            | City<br>mission  | State<br>TX           | Zip Code<br>78574   | Transaction ID: SA11A1.6472   |
|            | FEC ID number of contributing federal political committee.   | C                     | 78374   | Amount of Each Receipt this Period  154.69  |
|            | Name of Employer selfemployed  | Occupation physician  | 1   | contribution  |
|            | Receipt For: Primary General Other (specify)   | Aggregate             | Year-to-Date ▼ 695.59   |   |
| ₹          | Full Name (Last, First, Middle Initial) Alfredo Gonzalez   |                       |   | Date of Receipt   |
|            | Mailing Address 2305 Monaco Drive  |                       |   | 0 6 1 5 2 0 0 7   |
|            | City   | State                 | Zip Code  | Transaction ID: SA11A1.6598   |
|            | mission  FEC ID number of contributing federal political committee.  | C                     | 78574   | Amount of Each Receipt this Period  125.26  |
|            | Name of Employer selfemployed  | Occupation physician  |   | contribution  |
|            | Receipt For:  Primary General  Other (specify) ▼   | Aggregate             | Year-to-Date ▼ 820.85   |   |
| <b>)</b> . | Full Name (Last, First, Middle Initial) Jaime Gonzalez   |                       |   | Date of Receipt   |
|            | Mailing Address 3511 Plazas del Lago   |                       |   | 04 12 7 2007  |
|            | City edinburg  | State<br>TX           | Zip Code<br>78539   | Transaction ID: SA11A1.6351   |
|            | FEC ID number of contributing federal political committee.   | C                     | 78539   | Amount of Each Receipt this Period  250.00  |
|            | Name of Employer selfemployed  | Occupation private in |   | contribution  |
|            | Receipt For: Primary General Other (specify)   | Aggregate             | Year-to-Date ▼ 1000.00  |   |
| S          | UBTOTAL of Receipts This Page (optional)   |                       |   | 529.95  |
|            | <del>`</del>   |                       | <u> </u>  |   |

| SCHEDULE A (FEC Form 3X) |  |                              | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 44 / 123   |
|--------------------------|--|------------------------------|-------------------------------------|--|
| ITEMIZED RECEIPTS        |  |                              | or each category of the             | (check only one)   |
| •••                      | LIMIZED RECEIF 13  |                              | Detailed Summary Page               | X   11a   11b   11c   12   |
|                          | ., ., ., ., ., ., ., ., ., ., ., ., ., .   |                              |                                     | 13 14 15 16 17   |
| or                       | y information copied from such Reports and St<br>for commercial purposes, other than using the | atements may<br>name and ado | dress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |
| $\setminus$              | NAME OF COMMITTEE (In Full)  |                              |                                     |  |
|                          | BORDER HEALTH FEDERAL PAC  |                              |                                     |  |
| A.                       | Full Name (Last, First, Middle Initial)<br>Jaime Gonzalez                                      |                              |                                     | Date of Receipt  |
|                          | Mailing Address 3511 Plazas del Lago   |                              |                                     | 05 11 2007   |
|                          | City   | State                        | Zip Code                            | Transaction ID: SA11A1.6473  |
|                          | edinburg   | TX                           | 78539                               | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | С                            |                                     | 250.00   |
|                          | Name of Employer selfemployed  | Occupation private in        |                                     | contribution   |
|                          | Receipt For:   |                              | Year-to-Date ▼                      |  |
|                          | Primary General  |                              | 1250.00                             | 7  |
|                          | Other (specify) ▼  | 0 0                          | 1230.00                             |  |
| В.                       | Full Name (Last, First, Middle Initial)<br>Jaime Gonzalez                                      |                              |                                     | Date of Receipt  |
|                          | Mailing Address 3511 Plazas del Lago   | 06 15 2007                   |                                     |  |
|                          | City   | State                        | Zip Code                            | Transaction ID: SA11A1.6599  |
|                          | edinburg   | <u>TX</u>                    | 78539                               | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | C                            |                                     | 250.00 contribution  |
|                          | Name of Employer selfemployed  | Occupation private in        |                                     | Contribution   |
|                          | Receipt For:   | Aggregate                    | e Year-to-Date ▼                    |  |
|                          | Primary General  |                              | 1500.00                             | 7  |
|                          | Other (specify)  | 0 0                          | 1300.00                             |  |
| c.                       | Full Name (Last, First, Middle Initial)<br>Juan Gonzalez-Dickson                               |                              |                                     | Date of Receipt  |
|                          | Mailing Address 1501 Meadwood  |                              |                                     | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$                                       |
|                          | City   | State                        | Zip Code                            | Transaction ID: SA11A1.6352  |
|                          | weslaco  | <u>TX</u>                    | 78596                               | Amount of Each Receipt this Period   |
|                          | FEC ID number of contributing federal political committee.                                     | C                            |                                     | 250.00   |
|                          | Name of Employer self-employed   | Occupation physician         |                                     | contribution   |
|                          |  |                              | Year-to-Date ▼                      |  |
|                          | Primary General Other (specify) ▼  |                              | 1000.00                             |  |
|                          |  |                              |                                     | 750.00   |
| Ls                       | UBTOTAL of Receipts This Page (optional)   |                              |                                     | 700.00   |
| _                        | OTAL This Period (last page this line number of  | only)                        | I                                   |  |

| SCHEDULE A (FEC Form 3X) |   |                                  | Use separate schedule(s)                      | FOR LINE NUMBER: PAGE 45 / 123                                  |
|--------------------------|---|----------------------------------|---|---|
|                          | EMIZED RECEIPTS   |                                  | or each category of the Detailed Summary Page | (check only one)    X   11a                                     |
| Ar                       | ny information copied from such Reports and S<br>for commercial purposes, other than using the  | tatements may                    | y not be sold or used by any perso            | on for the purpose of soliciting contributions                  |
| Š                        | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   | Traine and doc                   | areas or any political committee to           | SOLION CONTRIBUTION TOTAL SUCCESSION CONTRIBUTION               |
| Α.                       | Full Name (Last, First, Middle Initial) Juan Gonzalez-Dickson  Mailing Address 1501 Meadwood  City  weslaco  FEC ID number of contributing federal political committee. | State TX                         | Zip Code<br>78596                             | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|                          | Name of Employer self-employed  Receipt For:  Primary General  Other (specify) ▼  | Occupation physiciar             |   | contribution  |
| В.                       | Full Name (Last, First, Middle Initial)  Juan Gonzalez-Dickson  Mailing Address 1501 Meadwood   |                                  |   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y    |
|                          | City  | State                            | Zip Code                                      | Transaction ID: SA11A1.6600                                     |
|                          | weslaco  FEC ID number of contributing federal political committee.  Name of Employer self-employed  Receipt For:  Primary General  Other (specify) ▼                   | C Occupation physician Aggregate |   | Amount of Each Receipt this Period  250.00  contribution        |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Verley Gordon Mailing Address 1700 E. Mile 3 Road   | State                            | Zip Code                                      | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|                          | City<br>mission   | State<br>TX                      | 78574   | Transaction ID: SA11A1.6353  Amount of Each Receipt this Period |
|                          | FEC ID number of contributing federal political committee.  | C                                |   | 250.00  |
|                          | Name of Employer selfemployed  Receipt For:  Primary General Other (specify) ▼  | Occupation physician Aggregate   |   | contribution  |
| s                        | UBTOTAL of Receipts This Page (optional)  |                                  |   | 750.00  |
| T                        | OTAL This Period (last page this line number  | only)                            |   |   |

| SCHEDULE A (FEC Form 3X) |  |                      | Use separate schedule(s)   | FOR LINE NUMBER: PAGE 46 / 123  |
|--------------------------|--|----------------------|--|---|
|                          | EMIZED RECEIPTS  |                      | or each category of the Detailed Summary Page  | (check only one)    X   11a   |
| Ar                       | ny information copied from such Reports and S<br>for commercial purposes, other than using the | tatements may        | not be sold or used by any person  | on for the purpose of soliciting contributions solicit contributions from such committee. |
|                          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  |                      | and the second s |   |
| Α.                       | Full Name (Last, First, Middle Initial) Verley Gordon  Mailing Address 1700 E. Mile 3 Road     |                      |  | Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y                  |
|                          | City<br>mission  | State<br>TX          | Zip Code<br>78574  | Transaction ID: SA11A1.6475  Amount of Each Receipt this Period                           |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |  | 250.00  |
|                          | Name of Employer selfemployed  | Occupation physiciar |  | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate            | e Year-to-Date ▼<br>1250.00  |   |
| В.                       | Full Name (Last, First, Middle Initial) Verley Gordon  |                      |  | Date of Receipt   |
|                          | Mailing Address 1700 E. Mile 3 Road  |                      |  | 06 15 2007  |
|                          | City   | State                | Zip Code   | Transaction ID: SA11A1.6601   |
|                          | mission  | TX                   | 78574  | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |  | 250.00  |
|                          | Name of Employer selfemployed  | Occupation physician | 1  | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate            | e Year-to-Date ▼<br>1500.00  |   |
| C.                       | Full Name (Last, First, Middle Initial)<br>Enrique Griego                                      |                      |  | Date of Receipt   |
|                          | Mailing Address 905 Inspiratin Drive  City   | State                | Zip Code   | 0 4 1 2 2 0 0 7  Transaction ID: SA11A1.6354  |
|                          | pharr  | TX                   | 78577  | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.                                     | C                    | 10011  | 250.00  |
|                          | Name of Employer selfemployed  | Occupation physician | 1  | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate            | e Year-to-Date ▼ 1000.00   |   |
| s                        | UBTOTAL of Receipts This Page (optional)   |                      |  | 750.00  |
| Т                        | OTAL This Period (last page this line number   | only)                |  |   |

| SCHEDULE A (FEC Form 3X) |  |              | Use separate schedule(s)            | FOR LINE NUMBER:           | PAGE 47 / 123            |  |  |  |
|--------------------------|--|--------------|-------------------------------------|----------------------------|--------------------------|--|--|--|
|                          | ITEMIZED RECEIPTS  |              | or each category of the             | (check only one)           |                          |  |  |  |
| ••                       | LIMIZED REGENT 13  |              | Detailed Summary Page               | X 11a 11b                  | 11c   12<br>15   16   17 |  |  |  |
| Δ.                       | ny information conied from auch Banarta and S  | totomonto mo | , not be cold or used by any nerge  | 13 14 1                    |                          |  |  |  |
| or                       | ny information copied from such Reports and S<br>for commercial purposes, other than using the | name and add | dress of any political committee to | solicit contributions from | such committee.          |  |  |  |
| $\setminus$              | NAME OF COMMITTEE (In Full)  |              |                                     |                            |                          |  |  |  |
| $ \rangle$               | BORDER HEALTH FEDERAL PAC  |              |                                     |                            |                          |  |  |  |
|                          | Full Name (Last, First, Middle Initial)  |              |                                     |                            |                          |  |  |  |
| A.                       | Enrique Griego   |              |                                     | Date of Receipt            |                          |  |  |  |
|                          | Mailing Address 905 Inspiratin Drive   |              |                                     | 0 5 1 1                    |                          |  |  |  |
|                          | City   | State        | Zip Code                            | Transaction ID: S          |                          |  |  |  |
|                          | pharr  | TX           | 78577                               | Amount of Each Ro          |                          |  |  |  |
|                          | FEC ID number of contributing  |              |                                     | 7 tillount of Edolf Its    | <del></del>              |  |  |  |
|                          | federal political committee.   | C            |                                     |                            | 250.00                   |  |  |  |
|                          | Name of Employer selfemployed  | Occupation   | n                                   | contribution               |                          |  |  |  |
|                          | selfemployed   | physiciar    | 1                                   |                            |                          |  |  |  |
|                          | Receipt For:   | Aggregate    | e Year-to-Date ▼                    |                            |                          |  |  |  |
|                          | Primary General  |              | 1250.00                             | 1                          |                          |  |  |  |
|                          | Other (specify) ▼  | 0 0          |                                     | J                          |                          |  |  |  |
| _                        | Full Name (Last, First, Middle Initial)  | I            |                                     | 5. (5. ).                  |                          |  |  |  |
| В.                       | Enrique Griego   |              |                                     | Date of Receipt            |                          |  |  |  |
|                          | Mailing Address 905 Inspiratin Drive   |              |                                     | 06 15                      |                          |  |  |  |
|                          | City   | State        | Zip Code                            | Transaction ID: S          |                          |  |  |  |
|                          | pharr  | TX           | 78577                               | Amount of Each Re          |                          |  |  |  |
|                          | FEC ID number of contributing  |              | 1 1 1 1 1                           |                            | 250.00                   |  |  |  |
|                          | federal political committee.   | C            |                                     |                            | 250.00                   |  |  |  |
|                          | Name of Employer   | Occupation   | <u> </u>                            | contribution               |                          |  |  |  |
|                          | Name of Employer selfemployed  | physiciar    |                                     |                            |                          |  |  |  |
|                          | Receipt For:   |              | e Year-to-Date ▼                    |                            |                          |  |  |  |
|                          | Primary General  |              | 1500.00                             | 1                          |                          |  |  |  |
|                          | Other (specify)  |              | 1300.00                             |                            |                          |  |  |  |
|                          | Full Name (Last, First, Middle Initial)  | <u> </u>     |                                     |                            |                          |  |  |  |
| C.                       | John Guerra  |              |                                     | Date of Receipt            |                          |  |  |  |
|                          | Mailing Address 3105 Forest Court  |              |                                     | 0 4                        |                          |  |  |  |
|                          | City   | State        | Zip Code                            | Transaction ID: S          | A11A1.6355               |  |  |  |
|                          | mission  | TX           | 78572                               | Amount of Each Re          | eceipt this Period       |  |  |  |
|                          | FEC ID number of contributing  | С            |                                     |                            | 100.00                   |  |  |  |
|                          | federal political committee.   | 0            |                                     |                            |                          |  |  |  |
|                          | Name of Employer   |              | n                                   | contribution               |                          |  |  |  |
| Receipt For: Aggre       |  | physiciar    | 1                                   |                            |                          |  |  |  |
|                          |  | Aggregate    | e Year-to-Date ▼                    |                            |                          |  |  |  |
|                          | Primary General  |              | 400.00                              |                            |                          |  |  |  |
|                          | Other (specify) ▼  |              |                                     | 1                          |                          |  |  |  |
|                          |  |              |                                     |                            |                          |  |  |  |
| s                        | SUBTOTAL of Receipts This Page (optional)  |              |                                     |                            |                          |  |  |  |
|                          |  |              |                                     |                            |                          |  |  |  |
| T                        | <b>OTAL</b> This Period (last page this line number  | only)        | <b>&gt;</b>                         |                            |                          |  |  |  |

| SCHEDULE A (FEC Form 3X) |   |                      | Llea congrata cohodula(s)  | FOR LINE NUMBER: PAGE 48 / 123                                  |
|--------------------------|---|----------------------|--|---|
|                          | EMIZED RECEIPTS   |                      | Use separate schedule(s) or each category of the Detailed Summary Page | (check only one)    X   11a                                     |
| Ar                       | ny information copied from such Reports and S for commercial purposes, other than using the | tatements may        | y not be sold or used by any perso                                     | on for the purpose of soliciting contributions                  |
| or                       |   | name and add         | aress of any political committee to                                    | solicit contributions from such committee.                      |
| $\rangle$                | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC                                       |                      |  |   |
| Α.                       | Full Name (Last, First, Middle Initial)<br>John Guerra                                      |                      |  | Date of Receipt   |
|                          | Mailing Address 3105 Forest Court   |                      |  | 05 11 2007  |
|                          | City<br>mission   | State<br>TX          | Zip Code<br>78572  | Transaction ID: SA11A1.6477  Amount of Each Receipt this Period |
|                          | FEC ID number of contributing federal political committee.                                  | C                    |  | 100.00  |
|                          | Name of Employer selfemployed   | Occupation           |  | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼ 500.00  |   |
| —<br>В.                  | Full Name (Last, First, Middle Initial)<br>John Guerra                                      |                      |  | Date of Receipt   |
|                          | Mailing Address 3105 Forest Court   |                      |  | 06 15 2007  |
|                          | City  | State                | Zip Code   | Transaction ID: SA11A1.6603                                     |
|                          | mission   | TX                   | 78572  | Amount of Each Receipt this Period                              |
|                          | FEC ID number of contributing federal political committee.                                  | C                    |  | 100.00  |
|                          | Name of Employer selfemployed   | Occupation physiciar |  | contribution  |
|                          | Receipt For:  | Aggregate            | e Year-to-Date ▼   |   |
|                          | Primary General Other (specify) ▼   |                      | 600.00   |   |
| <u>С</u> .               | Full Name (Last, First, Middle Initial)<br>Marcy Guerra                                     |                      |  | Date of Receipt   |
|                          | Mailing Address 13337 Borolo Drive  |                      |  | 04 12 2007  |
|                          | City  | State                | Zip Code   | Transaction ID: SA11A1.6356                                     |
|                          | edinburg  | TX                   | 78541  | Amount of Each Receipt this Period                              |
|                          | FEC ID number of contributing federal political committee.                                  | C                    |  | 250.00 contribution   |
|                          | Name of Employer selfemployed   | Occupation physician | 1  | Continuation  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>1000.00  |   |
| s                        | UBTOTAL of Receipts This Page (optional)  |                      |  | 450.00  |
| Т                        | OTAL This Period (last page this line number  | only)                |  |   |

| SCHEDULE A (FEC Form 3X)  |                        | Use separate schedule(s)  | FOR LINE NUMBER: PAGE 49/123                        |
|---|------------------------|---|---|
| ITEMIZED RECEIPTS   |                        | or each category of the   | (check only one)                                    |
| · · · · · · · · · · · · · · · · · · ·   |                        | Detailed Summary Page   | X   11a     11b     11c     12     15     16     17 |
| Any information copied from such Reports and or for commercial purposes, other than using the | Statements man         | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions      |
| NAME OF COMMITTEE (In Full)   |                        |   |   |
| BORDER HEALTH FEDERAL PAC   |                        |   |   |
| Full Name (Last, First, Middle Initial)  Marcy Guerra   |                        |   | Date of Receipt                                     |
| Mailing Address 13337 Borolo Drive  |                        |   | 05 11 / Y Y Y Y Y                                   |
| City<br>edinburg  | State<br>TX            | Zip Code  | Transaction ID: SA11A1.6478                         |
| FEC ID number of contributing federal political committee.                                    | C                      | 78541   | Amount of Each Receipt this Period 250.00           |
| Name of Employer selfemployed   | Occupatio<br>physiciar |   | contribution  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate              | e Year-to-Date ▼<br>1250.00   |   |
| Full Name (Last, First, Middle Initial)  3. Marcy Guerra                                      | •                      |   | Date of Receipt                                     |
| Mailing Address 13337 Borolo Drive  |                        |   | 06 15 7 2007  |
| City<br>edinburg  | State<br>TX            | Zip Code  | Transaction ID: SA11A1.6604                         |
|   |                        | 78541   | Amount of Each Receipt this Period                  |
| FEC ID number of contributing federal political committee.                                    | C                      |   | 250.00 contribution                                 |
| Name of Employer selfemployed   | Occupation physician   |   | Continuation  |
| Receipt For:  | Aggregate              | e Year-to-Date ▼  |   |
| Primary General Other (specify) ▼   |                        | 1500.00   |   |
| Full Name (Last, First, Middle Initial) Rodolfo Guerrero                                      | 1                      |   | Date of Receipt                                     |
| Mailing Address 1402 E. 8th Street  |                        |   | 04 12 / Y Y Y Y Y Y                                 |
| City  | State                  | Zip Code  | Transaction ID: SA11A1.6357                         |
| weslaco   | TX                     | 78596   | Amount of Each Receipt this Period                  |
| FEC ID number of contributing federal political committee.                                    | C                      |   | 250.00 contribution                                 |
| Name of Employer selfemployed   | Occupatio<br>physiciar | 1   | Continuation  |
| Receipt For:  Primary  General  | Aggregate              | e Year-to-Date ▼  |   |
| Other (specify)   |                        | 1000.00   |   |
| SUBTOTAL of Receipts This Page (optional)   |                        |   | 750.00  |
| TOTAL This Period (last page this line number   | or only)               |   |   |
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| SCHEDULE A (FEC Form 3X) |   |                        | Use separate schedule(s)   | FOR LINE NUMBER: PAGE 50 / 123  |
|--------------------------|---|------------------------|--|---|
|                          | EMIZED RECEIPTS   |                        | or each category of the Detailed Summary Page  | (check only one)    X   11a   |
| Ar                       | y information copied from such Reports and S<br>for commercial purposes, other than using the | statements may         | not be sold or used by any perso   | on for the purpose of soliciting contributions solicit contributions from such committee. |
|                          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |                        | and the second s |   |
| Α.                       | Full Name (Last, First, Middle Initial) Rodolfo Guerrero Mailing Address 1402 E. 8th Street   |                        |  | Date of Receipt   |
|                          | City<br>weslaco   | State<br>TX            | Zip Code<br>78596  | Transaction ID: SA11A1.6479  Amount of Each Receipt this Period                           |
|                          | FEC ID number of contributing federal political committee.                                    | C                      |  | 250.00  |
|                          | Name of Employer selfemployed   | Occupation physician   | 1  | contribution  |
|                          | Receipt For: Primary General Other (specify)  | Aggregate              | e Year-to-Date ▼<br>1250.00  |   |
| В.                       | Full Name (Last, First, Middle Initial) Rodolfo Guerrero                                      |                        |  | Date of Receipt   |
|                          | Mailing Address 1402 E. 8th Street  |                        |  | 06 15 2007  |
|                          | City  | State                  | Zip Code   | Transaction ID: SA11A1.6605   |
|                          | weslaco FEC ID number of contributing federal political committee.                            | C                      | 78596  | Amount of Each Receipt this Period  250.00  |
|                          | Name of Employer selfemployed   | Occupation             |  | contribution  |
|                          | Receipt For:  | physiciar<br>Aggregate | e Year-to-Date ▼   | -   |
|                          | Primary General Other (specify) ▼   |                        | 1500.00  |   |
| C.                       | Full Name (Last, First, Middle Initial) Alberto Gutierrez                                     | •                      |  | Date of Receipt   |
|                          | Mailing Address 6020 Wisconsin  |                        |  | 04 12 2007  |
|                          | City<br>edinburg  | State<br>TX            | Zip Code<br>78539  | Transaction ID: SA11A1.6358  Amount of Each Receipt this Period                           |
|                          | FEC ID number of contributing federal political committee.                                    | C                      | 1 1 1 1 1 1  | 250.00  |
|                          | Name of Employer selfemployed   | Occupation physician   | 1  | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate              | e Year-to-Date ▼<br>1000.00  |   |
| s                        | UBTOTAL of Receipts This Page (optional)  |                        |  | 750.00  |
| T                        | OTAL This Period (last page this line number  | only)                  |  |   |

| c /           | CHEDIII E A /EEC Earm 2V)  |                         |  | FOR LINE NUMBER: PAGE 51 / 123             |
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| <u>ا</u> ت    | SCHEDULE A (FEC Form 3X)   |                         | Use separate schedule(s)               | (check only one)                           |
| IT            | EMIZED RECEIPTS  |                         | or each category of the                | X 11a 11b 11c 12                           |
|               |  |                         | Detailed Summary Page                  | 13 14 15 16 17                             |
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| or            | ly information copied from such Reports and Stat<br>for commercial purposes, other than using the na | ame and add             | dress of any political committee to    | solicit contributions from such committee. |
| $\overline{}$ | NAME OF COMMITTEE (In Full)  |                         |  |  |
| /             | BORDER HEALTH FEDERAL PAC  |                         |  |  |
| /             | BORDER HEALTHT EDERAL FAC  |                         |  |  |
|               | Full Name (Last, First, Middle Initial)  |                         |  |  |
| ۹.            | Alberto Gutierrez  |                         |  | Date of Receipt                            |
|               | Mailing Address 6020 Wisconsin   |                         |  | M M / D D / Y Y Y Y                        |
|               | 0 0020 11.000  |                         |  | 05 11 2007                                 |
|               | City   | State                   | Zip Code                               | Transaction ID: SA11A1.6480                |
|               | edinburg   | TX                      | 78539                                  | Amount of Each Receipt this Period         |
|               | FEC ID number of contributing  |                         |  |  |
|               | federal political committee.   | C                       |  | 250.00                                     |
|               |  |                         |  | contribution                               |
|               | Name of Employer selfemployed  | Occupation              | า                                      | Contribution                               |
|               | Sellemployed   | physician               | 1                                      |  |
|               | Receipt For:   | Aggregate               | Year-to-Date ▼                         |  |
|               | Primary General  |                         | 1050.00                                |  |
|               | Other (specify)  |                         | 1250.00                                |  |
|               |  |                         |  |  |
| _             | Full Name (Last, First, Middle Initial)  |                         |  |  |
| 3.            | Alberto Gutierrez  |                         |  | Date of Receipt                            |
|               | Mailing Address 6020 Wisconsin   |                         |  | 06 15 2007                                 |
|               | 211  | 01-1-                   | 7'- 0-1-                               |  |
|               | City   | State                   | Zip Code                               | Transaction ID: SA11A1.6606                |
|               | edinburg   | TX                      | 78539                                  | Amount of Each Receipt this Period         |
|               | FEC ID number of contributing  | С                       |  | 250.00                                     |
|               | federal political committee.   |                         |  |  |
|               | Name of Employer   | Occupation              | า                                      | contribution                               |
|               | selfemployed   | physician               |  |  |
|               | Receipt For:   | • •                     | Year-to-Date ▼                         |  |
|               | Primary General  | 00 0                    |  | 1  |
|               | Other (specify)  |                         | 1500.00                                |  |
|               |  |                         |  |  |
|               | Full Name (Last, First, Middle Initial)  |                         |  |  |
| Э.            | Marco Gutierrez  |                         |  | Date of Receipt                            |
|               | Mailing Address 511 N. Depot Road  |                         |  | M M / D D / Y Y Y Y                        |
|               | -  |                         |  | 04 12 2007                                 |
|               | City   | State                   | Zip Code                               | Transaction ID: SA11A1.6359                |
|               | edinburg   | TX                      | 78541                                  | Amount of Each Receipt this Period         |
|               | FEC ID number of contributing  |                         |  | 250.00                                     |
|               | federal political committee.   | C                       |  | 250.00                                     |
|               | Name of Employer   | Occupation              | า                                      | contribution                               |
|               | selfemployed   | physician               |  |  |
|               | Receipt For:   |                         | Year-to-Date ▼                         | $\dashv$                                   |
|               | Primary General  | , iggi ogato            | Tour to Buto V                         |  |
|               | Other (specify)  |                         | 1000.00                                |  |
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|               | L  |                         |  |  |
| 0             | UBTOTAL of Receipts This Page (optional)   |                         |  | 750.00                                     |
| _             | CDICIAL OF TOOCIPIS THIS T age (optional)  |                         |  |  |
| T             | OTAL This Period (last page this line number on  | lv)                     |  |  |
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|          | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS   |                        | Use separate schedule(s) or each category of the Detailed Summary Page  | FOR LINE NUMBER:   PAGE 52 / 123   (check only one)             |
|----------|---|------------------------|---|---|
| Ar       | ny information copied from such Reports and Statem for commercial purposes, other than using the name | nents may<br>e and add | not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions                  |
|          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |                        | ,,,   |   |
| Α.       | Full Name (Last, First, Middle Initial)<br>Marco Gutierrez  |                        |   | Date of Receipt   |
|          | Mailing Address 511 N. Depot Road   |                        |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                     |
|          | •   | State                  | Zip Code  | Transaction ID: SA11A1.6481                                     |
|          | FFC ID number of contribution   | C                      | 78541   | Amount of Each Receipt this Period  250.00                      |
|          | selfemployed  | ccupation              |   | contribution  |
|          |   | •                      | e Year-to-Date ▼<br>1250.00   |   |
| В.       | Full Name (Last, First, Middle Initial)<br>Marco Gutierrez  |                        |   | Date of Receipt   |
|          | Mailing Address 511 N. Depot Road   | 01-1-                  | 7'. 0.11  | 06 15 2007  |
|          | •   | State<br>TX            | Zip Code<br>78541   | Transaction ID: SA11A1.6607  Amount of Each Receipt this Period |
|          | FEC ID remarks of a cartain stine.  | C                      | 70071   | 250.00  |
|          | selfemploved  | ccupation<br>hysiciar  |   | — contribution  |
|          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate              | e Year-to-Date ▼<br>1500.00   |   |
| <u> </u> | Full Name (Last, First, Middle Initial) Miguel Gutierrez  |                        |   | Date of Receipt   |
|          | Mailing Address 224 Lindberg  |                        |   | 0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                     |
|          | ,   | State<br>TX            | Zip Code<br>78501   | Transaction ID: SA11A1.6360                                     |
|          | EEC ID assembles of a setable stine.  | C                      | 70301   | Amount of Each Receipt this Period  250.00                      |
|          | coltomployed  | ccupation<br>hysiciar  |   | contribution  |
|          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate              | e Year-to-Date ▼<br>1000.00   |   |
| s        | UBTOTAL of Receipts This Page (optional)  |                        | )   | 750.00  |
| Т        | OTAL This Period (last page this line number only)  |                        |   |   |

| SCHEDULE A (FEC Form 3X)  Use separate sched |   |                      | Use separate schedule(s)            | FOR LINE NUMBER:              | PAGE 53 / 123            |
|--|---|----------------------|-------------------------------------|-------------------------------|--------------------------|
|  | ITEMIZED RECEIPTS   |                      | or each category of the             | (check only one)              |                          |
| ••   | LIMIZED RECEIL TO   |                      | Detailed Summary Page               | X 11a 11b                     | 11c   12<br>15   16   17 |
| ۸۰   | winformation against from such Departs and St   | otomonto mo          | , not be cold or used by any nerce  | n for the purpose of coliciti |                          |
| or   | y information copied from such Reports and St for commercial purposes, other than using the | name and add         | dress of any political committee to | solicit contributions from s  | uch committee.           |
| $\setminus$                                  | NAME OF COMMITTEE (In Full)   |                      |                                     |                               |                          |
| $\rangle$                                    | BORDER HEALTH FEDERAL PAC   |                      |                                     |                               |                          |
| _  | Full Name (Last, First, Middle Initial)   |                      |                                     |                               |                          |
| Α.   | Miguel Gutierrez  |                      |                                     | Date of Receipt               |                          |
|  | Mailing Address 224 Lindberg  |                      |                                     | 0 5 1 1                       | 2007                     |
|  | City  | State                | Zip Code                            | Transaction ID: SA            |                          |
|  | <u>mcallen</u>  | TX                   | 78501                               | Amount of Each Rec            |                          |
|  | FEC ID number of contributing federal political committee.                                  | C                    |                                     |                               | 250.00                   |
|  |   |                      |                                     | contribution                  |                          |
|  | Name of Employer selfemployed   | Occupation physician |                                     | Continbution                  |                          |
|  | Receipt For:  |                      | Year-to-Date ▼                      | _                             |                          |
|  | Primary General   | 33 -3                |                                     | 1                             |                          |
|  | Other (specify) ▼   |                      | 1250.00                             |                               |                          |
|  |   |                      |                                     |                               |                          |
| В.   | Full Name (Last, First, Middle Initial) Miguel Gutierrez                                    |                      |                                     | Date of Receipt               |                          |
|  | Mailing Address 224 Lindberg  |                      |                                     | M ' M / D ' D                 | / <b>Y Y Y Y</b>         |
|  |   |                      |                                     | 06 15 2007                    |                          |
|  | City  | State                | Zip Code                            | Transaction ID: SA            |                          |
|  | mcallen   | TX                   | 78501                               | Amount of Each Rec            | eipt this Period         |
|  | FEC ID number of contributing federal political committee.                                  | C                    |                                     |                               | 250.00                   |
|  |   |                      |                                     | contribution                  |                          |
|  | Name of Employer selfemployed   | Occupation           |                                     | Contribution                  |                          |
|  |   | physician            |                                     |                               |                          |
|  | Receipt For:  Primary  General  | Aggregate            | e Year-to-Date ▼                    | ,                             |                          |
|  | Other (specify)   |                      | 1500.00                             |                               |                          |
|  |   |                      |                                     | ·                             |                          |
| С.   | Full Name (Last, First, Middle Initial) Victor Haddad                                       |                      |                                     | Date of Receipt               |                          |
| -  | Mailing Address 4008 Burns Drive South  | า                    |                                     | M M / D D                     | / <b>Y Y Y Y</b>         |
|  |   |                      |                                     | 04 12                         | 2007                     |
|  | City  | State                | Zip Code                            | Transaction ID: SA            | 11A1.6361                |
|  | mcallen   | TX                   | 78503                               | Amount of Each Rec            | eipt this Period         |
|  | FEC ID number of contributing   | С                    |                                     |                               | 250.00                   |
|  | federal political committee.  |                      |                                     |                               |                          |
|  | Name of Employer selfemployed   | Occupation           |                                     | contribution                  |                          |
|  |   | physiciar            |                                     |                               |                          |
|  | Receipt For:  Primary  General  | Aggregate            | Year-to-Date ▼                      | , [                           |                          |
|  | Other (specify)   |                      | 1000.00                             |                               |                          |
|  |   | 0 0                  |                                     | 1                             |                          |
|  |   |                      |                                     |                               |                          |
| s  | UBTOTAL of Receipts This Page (optional)  |                      |                                     |                               | 750.00                   |
| $\vdash$                                     |   |                      | <u> </u>                            |                               |                          |
| T  | OTAL This Period (last page this line number of   | only)                | <b>&gt;</b>                         |                               |                          |

| S                 | CHEDULE A (FEC Form 3X)   |                       |   | FOR LINE NUMBER: PAGE 54 / 123                 |  |
|-------------------|---|-----------------------|---|--|--|
| ITEMIZED RECEIPTS |   |                       | Use separate schedule(s)<br>or each category of the | (check only one)                               |  |
| П                 | EMIZED RECEIPTS   |                       | Detailed Summary Page                               | X 11a 11b 11c 12                               |  |
|                   |   |                       |   | 13 14 15 16 17                                 |  |
| Ar                | y information copied from such Reports and States for commercial purposes, other than using the i | atements may          | not be sold or used by any person                   | on for the purpose of soliciting contributions |  |
| or                |   | name and add          | aress of any political committee to                 | solicit contributions from such committee.     |  |
|                   | NAME OF COMMITTEE (In Full)   |                       |   |  |  |
| 1/                | BORDER HEALTH FEDERAL PAC   |                       |   |  |  |
| _                 | Full Name (Last, First, Middle Initial)   |                       |   |  |  |
| A.                | Victor Haddad   |                       |   | Date of Receipt                                |  |
|                   | Mailing Address 4008 Burns Drive South  | 1                     |   | M M / D D / Y Y Y Y                            |  |
|                   | Cit.  | 01-1-                 | 7:- O-d-  | 05 11 2007                                     |  |
|                   | City  | State                 | Zip Code  | Transaction ID: SA11A1.6483                    |  |
|                   | mcallen   | TX                    | 78503   | Amount of Each Receipt this Period             |  |
|                   | FEC ID number of contributing federal political committee.  | C                     |   | 250.00   |  |
|                   | rederal political committee.  |                       |   |  |  |
|                   | Name of Employer selfemployed   | Occupation            |   | contribution                                   |  |
|                   |   | physician             |   |  |  |
|                   | Receipt For:  | Aggregate             | Year-to-Date ▼                                      |  |  |
|                   | Primary General   | ' '                   | 1250.00   |  |  |
|                   | Other (specify)   | 0 0                   | 1 1 1 1 1 1 1                                       | J.   |  |
| _                 | Full Name (Last, First, Middle Initial)   |                       |   |  |  |
| В.                | Victor Haddad   |                       |   | Date of Receipt                                |  |
|                   | Mailing Address 4008 Burns Drive South  | 1                     |   | 06 15 2007                                     |  |
|                   | City  | Ctoto                 | Zip Code  |  |  |
|                   | mcallen   | State<br>TX           | 78503   | Transaction ID: SA11A1.6609                    |  |
|                   |   | 1/                    | 76303   | Amount of Each Receipt this Period             |  |
|                   | FEC ID number of contributing federal political committee.  | C                     |   | 250.00   |  |
|                   | ·   |                       |   | contribution                                   |  |
|                   | Name of Employer selfemployed   | Occupation            |   | Contribution                                   |  |
|                   |   | physician             |   |  |  |
|                   | Receipt For: Primary General  | Aggregate             | Year-to-Date ▼                                      |  |  |
|                   | Other (specify)   | ' '                   | 1500.00   |  |  |
|                   | Carior (opcomy) 🔻   | 0 0                   |   |  |  |
| _                 | Full Name (Last, First, Middle Initial)   |                       |   |  |  |
| C.                | Robert Helbing  |                       |   | Date of Receipt                                |  |
|                   | Mailing Address 820 Tamarack  |                       |   | 04 12 2007                                     |  |
|                   | City  | State                 | Zip Code  | Transaction ID: SA11A1.6362                    |  |
|                   | mcallen   | TX                    | 78501   | Amount of Each Receipt this Period             |  |
|                   | FEC ID number of contributing   |                       | 1 1 1 1 1 1   |  |  |
|                   | federal political committee.  | C                     |   | 116.36   |  |
|                   | Name of Equations   | 10                    |   | contribution                                   |  |
|                   | Name of Employer self-employed  | Occupation private in |   |  |  |
|                   | Receipt For:  | private in            | Year-to-Date <b>V</b>                               |  |  |
|                   | Primary General   | , iggi egale          | Tour to Dute ¥                                      | 1  |  |
|                   | Other (specify)   |                       | 429.33  |  |  |
|                   |   |                       |   | 1  |  |
|                   |   |                       |   |  |  |
| s                 | UBTOTAL of Receipts This Page (optional)  |                       |   | 616.36   |  |
| $\vdash$          |   |                       | <del>`</del>  |  |  |

| S                 | CHEDULE A (FEC Form 3X)  |                       | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 55 / 123              |
|-------------------|--|-----------------------|-------------------------------------|---|
| ITEMIZED RECEIPTS |  |                       | or each category of the             | (check only one)                            |
| ••                | LIMIZED HEOLII 10  |                       | Detailed Summary Page               | X 11a 11b 11c 12                            |
| ۸r                | y information copied from such Reports and Si                    | tatamente mai         | rot be sold or used by any pers     | 13 14 15 16 17                              |
| or                | for commercial purposes, other than using the                    | name and add          | dress of any political committee to | osolicit contributions from such committee. |
| $\setminus$       | NAME OF COMMITTEE (In Full)                                      |                       |                                     |   |
|                   | BORDER HEALTH FEDERAL PAC  |                       |                                     |   |
| A.                | Full Name (Last, First, Middle Initial) Robert Helbing           |                       |                                     | Date of Receipt                             |
|                   | Mailing Address 820 Tamarack                                     |                       |                                     | 05 11 2007                                  |
|                   | City   | State                 | Zip Code                            | Transaction ID: SA11A1.6484                 |
|                   | mcallen  | TX                    | 78501                               | Amount of Each Receipt this Period          |
|                   | FEC ID number of contributing federal political committee.       | C                     |                                     | 122.78                                      |
|                   | Name of Employer self-employed                                   | Occupation private in |                                     | contribution                                |
|                   | Receipt For:   |                       | e Year-to-Date ▼                    |   |
|                   | Primary General  | 00 0                  |                                     | 7   |
|                   | Other (specify) ▼  |                       | 552.11                              |   |
| В.                | Full Name (Last, First, Middle Initial)<br>Robert Helbing        |                       |                                     | Date of Receipt                             |
|                   | Mailing Address 820 Tamarack                                     |                       |                                     | 0 6 1 5 2 0 0 7                             |
|                   | City   | State                 | Zip Code                            | Transaction ID: SA11A1.6610                 |
|                   | mcallen  | TX                    | 78501                               | Amount of Each Receipt this Period          |
|                   | FEC ID number of contributing federal political committee.       | C                     |                                     | 99.42                                       |
|                   | Name of Employer self-employed                                   | Occupation            |                                     | contribution                                |
|                   | Receipt For:   | private in            | e Year-to-Date <b>V</b>             | -   |
|                   | Primary General  | Aggregate             | Teal to Bate V                      | 7   |
|                   | Other (specify) ▼  | 0 0                   | 651.53                              |   |
| <u>С</u> .        | Full Name (Last, First, Middle Initial)<br>Maximiliano Hernandez |                       |                                     | Date of Receipt                             |
|                   | Mailing Address 301 Byron Nelson Drive<br>#40 Villas Jardin      | е                     |                                     | 04 12 2007                                  |
|                   | City   | State                 | Zip Code                            | Transaction ID: SA11A1.6363                 |
|                   | mcallen  | TX                    | 78503                               | Amount of Each Receipt this Period          |
|                   | FEC ID number of contributing federal political committee.       | C                     |                                     | 250.00                                      |
|                   | Name of Employer selfemployed                                    | Occupation physician  |                                     | contribution                                |
|                   | Receipt For:   | Aggregate             | e Year-to-Date ▼                    |   |
|                   | Primary General  |                       | 1000.00                             | 7   |
|                   | Other (specify) ▼  | 0 0                   | 1000.00                             |   |
| s                 | UBTOTAL of Receipts This Page (optional)                         |                       |                                     | 472.20                                      |
| $\vdash$          |  |                       | •                                   |   |
| T                 | OTAL This Period (last page this line number                     | only)                 |                                     |   |

| S          | CHEDULE A (FEC Form 3X)                                       |              |   | FOR LINE NUMBER: PAGE 56 / 123                        |  |
|------------|---|--------------|---|---|--|
| •          |   |              | Use separate schedule(s)<br>or each category of the | (check only one)                                      |  |
| П          | EMIZED RECEIPTS   |              | Detailed Summary Page                               | X 11a 11b 11c 12                                      |  |
|            |   |              |   | 13 14 15 16 17  |  |
| Ar         | y information copied from such Reports and St                 | atements may | not be sold or used by any person                   | on for the purpose of soliciting contributions        |  |
| or         | for commercial purposes, other than using the                 | name and add | dress of any political committee to                 | o solicit contributions from such committee.          |  |
|            | NAME OF COMMITTEE (In Full)                                   |              |   |   |  |
| $ \rangle$ | BORDER HEALTH FEDERAL PAC                                     |              |   |   |  |
|            |   |              |   |   |  |
| Α.         | Full Name (Last, First, Middle Initial) Maximiliano Hernandez |              |   | Date of Receipt                                       |  |
| Α.         |   | _            |   | <del>-</del>  |  |
|            | Mailing Address 301 Byron Nelson Drive #40 Villas Jardin      | <del>;</del> |   | 05 11 2007  |  |
|            | City  | State        | Zip Code  | Transaction ID: SA11A1.6485                           |  |
|            | mcallen   | TX           | 78503   | Amount of Each Receipt this Period                    |  |
|            | FEC ID number of contributing                                 |              |   |   |  |
|            | federal political committee.                                  | C            |   | 250.00  |  |
|            | ·   |              |   | contribution  |  |
|            | Name of Employer selfemployed                                 | Occupation   |   | Continuation  |  |
|            | · · · · · · · · · · · · · · · · · · ·                         | physician    |   |   |  |
|            | Receipt For:  | Aggregate    | Year-to-Date ▼                                      |   |  |
|            | Primary General   | ' '          | 1250.00   |   |  |
|            | Other (specify)   |              |   |   |  |
| _          | Full Name (Last, First, Middle Initial)                       |              |   |   |  |
| В.         | Maximiliano Hernandez   |              |   | Date of Receipt                                       |  |
|            | Mailing Address 301 Byron Nelson Drive                        |              |   | M M / D D / Y Y Y Y                                   |  |
|            | #40 Villas Jardin   |              |   | 06 15 2007  |  |
|            | City  | State        | Zip Code  | Transaction ID: SA11A1.6611                           |  |
|            | mcallen   | TX           | 78503   | Amount of Each Receipt this Period                    |  |
|            | FEC ID number of contributing                                 |              |   | 250.00  |  |
|            | federal political committee.                                  | С            |   | 250.00  |  |
|            | Name of Employer  | Occupation   |   | contribution  |  |
|            | selfemployed  | physician    |   |   |  |
|            | Receipt For:  | + ' '        | Year-to-Date ▼                                      | _   |  |
|            | Primary General   | riggregate   | Total to Bate V                                     | 1   |  |
|            | Other (specify) ▼   |              | 1500.00   |   |  |
|            |   |              |   | ·   |  |
| _          | Full Name (Last, First, Middle Initial)                       |              |   |   |  |
| C.         | Maria Hoffman   |              |   | Date of Receipt                                       |  |
|            | Mailing Address 802 Inspiration Road                          |              |   | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ |  |
|            | Cit.  | 01-1-        | 7in Code  |   |  |
|            | City  | State        | Zip Code  | Transaction ID: SA11A1.6364                           |  |
|            | pharr   | TX           | 78577   | Amount of Each Receipt this Period                    |  |
|            | FEC ID number of contributing federal political committee.    | C            |   | 250.00  |  |
|            | rederai politicai committee.                                  |              |   |   |  |
|            | Name of Employer  | Occupation   | 1   | contribution  |  |
|            | selfemployed  | physician    | <u> </u>  |   |  |
|            | Receipt For:  | Aggregate    | Year-to-Date ▼                                      |   |  |
|            | Primary General   |              | 1000.00   | 1   |  |
|            | Other (specify)   |              | 1000.00   |   |  |
| _          |   |              |   |   |  |
|            |   |              |   | 750.00  |  |
| S          | UBTOTAL of Receipts This Page (optional)                      |              |   | 750.00  |  |
|            |   |              |   |   |  |

| SCHEDULE A (FEC Form 3X) |  |                      | Use separate schedule(s)                      | FOR LINE NUMBER: PAGE 57 / 123  |
|--------------------------|--|----------------------|---|---|
|                          | EMIZED RECEIPTS  |                      | or each category of the Detailed Summary Page | (check only one)    X   11a   |
| Ar                       | y information copied from such Reports and Si<br>for commercial purposes, other than using the | tatements may        | y not be sold or used by any perso            | on for the purpose of soliciting contributions solicit contributions from such committee. |
|                          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  |                      | aroso or arry pointed committee to            |   |
| Α.                       | Full Name (Last, First, Middle Initial)  Maria Hoffman  Mailing Address 802 Inspiration Road   |                      |   | Date of Receipt   |
|                          | City   | State                | Zin Codo                                      | 05 11 2007  |
|                          | pharr  | TX                   | Zip Code<br>78577                             | Transaction ID: SA11A1.6486  Amount of Each Receipt this Period                           |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |   | 250.00  |
|                          | Name of Employer selfemployed  | Occupation physiciar | 1   | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate            | e Year-to-Date ▼<br>1250.00                   |   |
| В.                       | Full Name (Last, First, Middle Initial)<br>Maria Hoffman                                       |                      |   | Date of Receipt   |
|                          | Mailing Address 802 Inspiration Road   |                      |   | 06 15 2007  |
|                          | City   | State                | Zip Code                                      | Transaction ID: SA11A1.6612   |
|                          | pharr  | TX                   | 78577   | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.                                     | С                    |   | 250.00 contribution   |
|                          | Name of Employer selfemployed  | Occupation physician |   | Contribution  |
|                          | Receipt For:   |                      | e Year-to-Date ▼                              | 7   |
|                          | Primary General Other (specify) ▼  | 0 0                  | 1500.00                                       |   |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Vincent Honrubia                                       |                      |   | Date of Receipt   |
| <b>.</b>                 | Mailing Address 204 Rio Grande   |                      |   | 0 4 1 2 2 0 0 7   |
|                          | City   | State                | Zip Code                                      | Transaction ID: SA11A1.6365   |
|                          | mission  | TX                   | 78572   | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |   | 250.00 contribution   |
|                          | Name of Employer selfemployed  | Occupation physician |   |   |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate            | e Year-to-Date ▼<br>1000.00                   |   |
| s                        | UBTOTAL of Receipts This Page (optional)   |                      | )   | 750.00  |
| Т                        | OTAL This Period (last page this line number   | only)                |   |   |

| S                 | CHEDULE A (FEC Form 3X)   |                                | llog concrete cobodulo(s)  | FOR LINE NUMBER: PAGE 58 / 123   |
|-------------------|---|--------------------------------|--|--|
| ITEMIZED RECEIPTS |   | or each category of the        |  | (check only one)   |
| •••               | LIMIZED RECEIP 13   |                                | Detailed Summary Page  | X   11a   11b   11c   12   |
| _                 |   |                                |  | 13 14 15 16 17   |
| or                | y information copied from such Reports and S for commercial purposes, other than using the  | name and add                   | r not be sold or used by any pers<br>dress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |
| $\setminus$       | NAME OF COMMITTEE (In Full)   |                                |  |  |
|                   | BORDER HEALTH FEDERAL PAC   |                                |  |  |
| A.                | Full Name (Last, First, Middle Initial) Vincent Honrubia  |                                |  | Date of Receipt  |
|                   | Mailing Address 204 Rio Grande  |                                |  | 05 11 7 2007   |
|                   | City  | State                          | Zip Code   | Transaction ID: SA11A1.6487  |
|                   | mission   | TX                             | 78572  | Amount of Each Receipt this Period   |
|                   | FEC ID number of contributing federal political committee.  | C                              |  | 250.00   |
|                   | Name of Employer selfemployed   | Occupation                     |  | contribution   |
|                   | Receipt For:  |                                | Year-to-Date ▼   |  |
|                   | Primary General   | -                              | 1050.00  | 7  |
|                   | Other (specify) ▼   | 0 0                            | 1250.00  | _  |
| В.                | Full Name (Last, First, Middle Initial)<br>Vincent Honrubia   |                                |  | Date of Receipt  |
|                   | Mailing Address 204 Rio Grande  |                                |  | 06 15 7 2007   |
|                   | City  | State                          | Zip Code   | Transaction ID: SA11A1.6613  |
|                   | mission   | TX                             | 78572  | Amount of Each Receipt this Period   |
|                   | FEC ID number of contributing federal political committee.  | C                              |  | 250.00   |
|                   | Name of Employer selfemployed   | Occupation physician           |  | contribution   |
|                   | Receipt For:  | Aggregate                      | Year-to-Date ▼   |  |
|                   | Primary General Other (specify) ▼   | 0 0                            | 1500.00  |  |
| _                 |   |                                |  |  |
| C.                | Full Name (Last, First, Middle Initial) Nelson Kalaf  |                                |  | Date of Receipt  |
| C.                | ,   |                                |  | Date of Receipt  O 4 1 2 2 0 0 7   |
| C.                | Nelson Kalaf  | State                          | Zip Code   | M M / D D / Y Y Y Y  |
| C.                | Nelson Kalaf Mailing Address 5401 N. 8th Street   | State<br>TX                    | Zip Code<br>78504  | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| C.                | Nelson Kalaf Mailing Address 5401 N. 8th Street City  |                                | ·  | Transaction ID: SA11A1.6368  Amount of Each Receipt this Period  250.00                      |
| С.                | Nelson Kalaf Mailing Address 5401 N. 8th Street  City mcAllen  FEC ID number of contributing  | TX                             | 78504  | Transaction ID: SA11A1.6368  Amount of Each Receipt this Period                              |
| <b>C</b> .        | Nelson Kalaf  Mailing Address 5401 N. 8th Street  City  mcAllen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:                                    | C Occupation physiciar         | 78504  | Transaction ID: SA11A1.6368  Amount of Each Receipt this Period  250.00                      |
| C.                | Nelson Kalaf  Mailing Address 5401 N. 8th Street  City  mcAllen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  | C Occupation physiciar         | 78504  | Transaction ID: SA11A1.6368  Amount of Each Receipt this Period  250.00                      |
|                   | Nelson Kalaf  Mailing Address 5401 N. 8th Street  City  mcAllen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General Other (specify) ▼ | Occupation physician Aggregate | 78504<br>Year-to-Date ▼ 1000.00  | Transaction ID: SA11A1.6368  Amount of Each Receipt this Period  250.00                      |
|                   | Nelson Kalaf  Mailing Address 5401 N. 8th Street  City  mcAllen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General                   | Occupation physician Aggregate | 78504<br>Year-to-Date ▼ 1000.00  | Transaction ID: SA11A1.6368  Amount of Each Receipt this Period  250.00  contribution        |

| SCHEDULE A (FEC Form 3X) |  |                      | Use separate schedule(s)            | FOR LINE NUMBER:             | PAGE 59 / 123            |
|--------------------------|--|----------------------|-------------------------------------|------------------------------|--------------------------|
| ITEMIZED RECEIPTS        |  |                      | or each category of the             | (check only one)             | 1                        |
| ••                       |  |                      | Detailed Summary Page               | X 11a 11b 1                  | 11c   12<br>15   16   17 |
| Δr                       | ay information copied from such Reports and S  | tatemente may        | y not be sold or used by any perso  |                              |                          |
| or                       | ly information copied from such Reports and S<br>for commercial purposes, other than using the | name and add         | dress of any political committee to | solicit contributions from s | such committee.          |
|                          | NAME OF COMMITTEE (In Full)  |                      |                                     |                              |                          |
| $\rangle$                | BORDER HEALTH FEDERAL PAC  |                      |                                     |                              |                          |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Nelson Kalaf  |                      |                                     | Date of Receipt              |                          |
|                          | Mailing Address 5401 N. 8th Street   |                      |                                     | 05 11                        | 2007                     |
|                          | City   | State                | Zip Code                            | Transaction ID: SA           |                          |
|                          | mcAllen  | TX                   | 78504                               | Amount of Each Red           | ceipt this Period        |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |                                     |                              | 250.00                   |
|                          | Name of Employer selfemployed  | Occupation physician |                                     | contribution                 |                          |
|                          | Receipt For:   |                      | Year-to-Date ▼                      |                              |                          |
|                          | Primary General  |                      | 1050.00                             | 1                            |                          |
|                          | Other (specify) ▼  | 0 0                  | 1250.00                             |                              |                          |
| В.                       | Full Name (Last, First, Middle Initial)<br>Nelson Kalaf  |                      |                                     | Date of Receipt              |                          |
|                          | Mailing Address 5401 N. 8th Street   |                      |                                     | 06 15                        | 2007                     |
|                          | City   | State                | Zip Code                            | Transaction ID: SA           | .11A1.6615               |
|                          | mcAllen  | TX                   | 78504                               | Amount of Each Red           | ceipt this Period        |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |                                     |                              | 250.00                   |
|                          | Name of Employer selfemployed  | Occupation           |                                     | contribution                 |                          |
|                          |  | physician            |                                     | _                            |                          |
|                          | Receipt For:  Primary  General   | Aggregate            | e Year-to-Date ▼                    | ,                            |                          |
|                          | Other (specify) ▼  | 0 0                  | 1500.00                             |                              |                          |
| <u> </u>                 | Full Name (Last, First, Middle Initial)<br>Gauri Kanhere                                       |                      |                                     | Date of Receipt              |                          |
|                          | Mailing Address 2548 Palm Circle   |                      |                                     | 0 4                          | 2007                     |
|                          | City   | State                | Zip Code                            | Transaction ID: SA           | 11A1.6369                |
|                          | rio grande city  | TX                   | 78582                               | Amount of Each Red           | ceipt this Period        |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |                                     |                              | 250.00                   |
|                          | Name of Employer selfemployed  | Occupation physician |                                     | contribution                 |                          |
|                          | Receipt For:   | Aggregate            | Year-to-Date ▼                      |                              |                          |
|                          | Primary General Other (specify) ▼  |                      | 1000.00                             |                              |                          |
| Г                        |  |                      |                                     |                              | 750.00                   |
| s                        | UBTOTAL of Receipts This Page (optional)   |                      | ·····                               | -                            | 750.00                   |
| T                        | OTAL This Period (last page this line number   | only)                |                                     |                              |                          |

| S                 | CHEDULE A (FEC Form 3X)   |                                | Llos concrete cobodulo(o)  | FOR LINE NUMBER: PAGE 60 / 123   |  |
|-------------------|---|--------------------------------|--|--|--|
| ITEMIZED RECEIPTS |   | or each category of the        |  | (check only one)   |  |
| •••               | LIMIZED RECEIP 13   |                                | Detailed Summary Page  | X   11a   11b   11c   12   |  |
| _                 |   |                                |  | 13 14 15 16 17   |  |
| or                | y information copied from such Reports and S for commercial purposes, other than using the  | name and add                   | r not be sold or used by any pers<br>Iress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |  |
| $\setminus$       | NAME OF COMMITTEE (In Full)   |                                |  |  |  |
|                   | BORDER HEALTH FEDERAL PAC   |                                |  |  |  |
| A.                | Full Name (Last, First, Middle Initial) Gauri Kanhere   |                                |  | Date of Receipt  |  |
|                   | Mailing Address 2548 Palm Circle  |                                |  | 05 11 7 2007   |  |
|                   | City  | State                          | Zip Code   | Transaction ID: SA11A1.6491  |  |
|                   | rio grande city   | TX                             | 78582  | Amount of Each Receipt this Period   |  |
|                   | FEC ID number of contributing federal political committee.  | C                              |  | 250.00   |  |
|                   | Name of Employer selfemployed   | Occupation                     |  | contribution   |  |
|                   | Receipt For:  | Aggregate                      | Year-to-Date ▼   |  |  |
|                   | Primary General   |                                | 1250.00  | 7  |  |
|                   | Other (specify) ▼   | 0 0                            | 1230.00  |  |  |
| В.                | Full Name (Last, First, Middle Initial)<br>Gauri Kanhere  |                                |  | Date of Receipt  |  |
|                   | Mailing Address 2548 Palm Circle  |                                |  | 06 15 2007   |  |
|                   | City  | State                          | Zip Code   | Transaction ID: SA11A1.6616  |  |
|                   | rio grande city   | TX                             | 78582  | Amount of Each Receipt this Period   |  |
|                   | FEC ID number of contributing federal political committee.  | C                              |  | 250.00   |  |
|                   | Name of Employer selfemployed   | Occupation physician           |  | contribution   |  |
|                   | Receipt For:  | Aggregate                      | Year-to-Date ▼   |  |  |
|                   | Primary General Other (specify) ▼   | 0 0                            | 1500.00  |  |  |
| _                 | Full Name (Last, First, Middle Initial)   |                                |  |  |  |
| C.                | Gholam Kiani  |                                |  | Date of Receipt  |  |
|                   | Mailing Address 213 e. Xenops   |                                |  | 04 12 2007   |  |
|                   |   |                                |  |  |  |
|                   | City  | State                          | Zip Code   | Transaction ID: SA11A1.6370  |  |
|                   | mcallen   | State<br>TX                    | Zip Code<br>78504  | Transaction ID: SA11A1.6370  Amount of Each Receipt this Period                              |  |
|                   | -   |                                | •  | Amount of Each Receipt this Period 250.00  |  |
|                   | mcallen FEC ID number of contributing   | TX                             | 78504  | Amount of Each Receipt this Period   |  |
|                   | mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:                  | C Occupation physiciar         | 78504  | Amount of Each Receipt this Period 250.00  |  |
|                   | mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed                                | C Occupation physiciar         | 78504  | Amount of Each Receipt this Period 250.00  |  |
|                   | mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General | C Occupation physiciar         | 78504  Year-to-Date ▼  | Amount of Each Receipt this Period 250.00  |  |
| s                 | mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General | Occupation physician Aggregate | 78504  Year-to-Date ▼  1000.00   | Amount of Each Receipt this Period 250.00  |  |

| S                 | CHEDULE A (FEC Form 3X)  |                      | Llea coparata cabadula(s)   | FOR LINE NUMBER: PAGE 61 / 123   |
|-------------------|--|----------------------|---|--|
| ITEMIZED RECEIPTS |  |                      | Use separate schedule(s)<br>or each category of the                     | (check only one)   |
| •••               | LIVIIZED RECEIP 13   |                      | Detailed Summary Page   | X   11a   11b   11c   12   |
| Δ                 | infanceation conicd from our b Donards and Ci  |                      |   | 13 14 15 16 17   |
| or                | y information copied from such Reports and St<br>for commercial purposes, other than using the | name and add         | rnot be sold or used by any personal ress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |
| $\setminus$       | NAME OF COMMITTEE (In Full)  |                      |   |  |
|                   | BORDER HEALTH FEDERAL PAC  |                      |   |  |
| A.                | Full Name (Last, First, Middle Initial)<br>Gholam Kiani  |                      |   | Date of Receipt  |
|                   | Mailing Address 213 e. Xenops  |                      |   | 05 11 2007   |
|                   | City   | State                | Zip Code  | Transaction ID: SA11A1.6492  |
|                   | mcallen  | TX                   | 78504   | Amount of Each Receipt this Period   |
|                   | FEC ID number of contributing federal political committee.                                     | C                    |   | 250.00   |
|                   | Name of Employer selfemployed  | Occupation physician |   | contribution   |
|                   | Receipt For:   |                      | Year-to-Date ▼  |  |
|                   | Primary General  |                      | 1250.00   | 1  |
|                   | Other (specify) ▼  | 0 0                  | 1230.00   |  |
| В.                | Full Name (Last, First, Middle Initial)<br>Gholam Kiani  |                      |   | Date of Receipt  |
|                   | Mailing Address 213 e. Xenops  |                      |   | 06 15 7 2007   |
|                   | City   | State                | Zip Code  | Transaction ID: SA11A1.6617  |
|                   | mcallen  | TX                   | 78504   | Amount of Each Receipt this Period   |
|                   | FEC ID number of contributing federal political committee.                                     | С                    |   | 250.00   |
|                   | Name of Employer selfemployed  | Occupation physician |   | contribution   |
|                   | Receipt For:   | Aggregate            | Year-to-Date ▼  |  |
|                   | Primary General  | -                    | 1500.00   | 7  |
|                   | ☐ Other (specify) ▼  | 0 0                  | 1000.00   |  |
| C.                | Full Name (Last, First, Middle Initial) Mary Elizabeth Klenz                                   |                      |   | Date of Receipt  |
| Ο.                | Mailing Address 5111 N. 10th Street  |                      |   | M M / D D / Y Y Y Y  |
|                   |  |                      |   | 04 12 2007   |
|                   | City   | State                | Zip Code  | Transaction ID: SA11A1.6371  |
|                   | mcallen  | TX                   | 78504   | Amount of Each Receipt this Period   |
|                   | FEC ID number of contributing federal political committee.                                     | С                    |   | 250.00   |
|                   | Name of Employer selfemployed  | Occupation physician |   | contribution   |
|                   | Receipt For:   |                      | Year-to-Date ▼  |  |
|                   | Primary General Other (specify) ▼  |                      | 1000.00   |  |
|                   |  | 750.00               |   |  |
| S                 | UBTOTAL of Receipts This Page (optional)   |                      |   | 730.00   |
| T                 | OTAL This Period (last page this line number of  | only)                |   |  |

## S

|    | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS   |                      | Use separate schedule(s) or each category of the                          | FOR LINE NUMBER: PAGE 62 / 123 (check only one)   |
|----|---|----------------------|---|---|
|    | EMIZED RECEIPTS   |                      | Detailed Summary Page   | X   11a   11b   11c   12   13   14   15   16   17   |
| Ar | ny information copied from such Reports and S<br>for commercial purposes, other than using the    | tatements may        | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
|    | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |                      |   |   |
| Α. | Full Name (Last, First, Middle Initial) Mary Elizabeth Klenz  Mailing Address 5111 N. 10th Street |                      |   | Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y                  |
|    | City<br>mcallen   | State<br>TX          | Zip Code<br>78504   | Transaction ID: SA11A1.6493  Amount of Each Receipt this Period                           |
|    | FEC ID number of contributing federal political committee.  | C                    |   | 250.00  |
|    | Name of Employer selfemployed   | Occupation physician | 1   | contribution  |
|    | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>1250.00   |   |
| В. | Full Name (Last, First, Middle Initial) Mary Elizabeth Klenz                                      |                      |   | Date of Receipt   |
|    | Mailing Address 5111 N. 10th Street   |                      |   | 06 15 2007  |
|    | City  | State                | Zip Code  | Transaction ID: SA11A1.6618   |
|    | mcallen  FEC ID number of contributing federal political committee.                               | C                    | 78504   | Amount of Each Receipt this Period  250.00  |
|    | Name of Employer selfemployed   | Occupation physician | 1   | contribution  |
|    | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>1500.00   |   |
| C. | Full Name (Last, First, Middle Initial) Alejandro Kudisch Mailing Address 323 Nightingale         | •                    |   | Date of Receipt   |
|    | City  | State                | Zip Code  | 0 4 1 2 2 0 0 7 Transaction ID: SA11A1.6372   |
|    | <u>mcallen</u>  | TX                   | 78504   | Amount of Each Receipt this Period  |
|    | FEC ID number of contributing federal political committee.  | C                    |   | 250.00  |
|    | Name of Employer selfemployed   | Occupation physician |   | contribution  |
|    | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>1000.00   |   |
| s  | UBTOTAL of Receipts This Page (optional)  |                      |   | 750.00  |
| T  | OTAL This Period (last page this line number  | only)                |   |   |

| SCHEDULE A (FEC Form 3X) |   |                     | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 63 / 12                               | 23          |  |  |  |
|--------------------------|---|---------------------|-------------------------------------|---|-------------|--|--|--|
| ITEMIZED RECEIPTS        |   |                     | or each category of the             | (check only one)  |             |  |  |  |
| ••                       |   |                     | Detailed Summary Page               | X 11a 11b 11c 12  | <b>—</b> 47 |  |  |  |
| ۸۰                       | winformation aspired from such Benerte and St   | estamenta mai       | , not be cold or used by any nerge  |   | 17          |  |  |  |
| or                       | ly information copied from such Reports and Si<br>for commercial purposes, other than using the | name and add        | dress of any political committee to | solicit contributions from such committee.                  |             |  |  |  |
|                          | NAME OF COMMITTEE (In Full)   |                     |                                     |   |             |  |  |  |
| $\rangle$                | BORDER HEALTH FEDERAL PAC   |                     |                                     |   |             |  |  |  |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Alejandro Kudisch                                    |                     |                                     | Date of Receipt   |             |  |  |  |
|                          | Mailing Address 323 Nightingale   |                     | 7.0                                 | 05 11 2007  |             |  |  |  |
|                          | City  | State               | Zip Code                            | Transaction ID: SA11A1.6494                                 |             |  |  |  |
|                          | mcallen   | TX                  | 78504                               | Amount of Each Receipt this Period                          |             |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                      | C                   |                                     | 250.0   | 0           |  |  |  |
|                          | Name of Employer selfemployed   | Occupation physcian |                                     | contribution  |             |  |  |  |
|                          | Receipt For:  | Aggregate           | e Year-to-Date ▼                    |   |             |  |  |  |
|                          | Primary General   |                     | 1250.00                             |   |             |  |  |  |
|                          | Other (specify) ▼   | 0 0                 | 1230.00                             |   |             |  |  |  |
| В.                       | Full Name (Last, First, Middle Initial)<br>Alejandro Kudisch                                    |                     |                                     | Date of Receipt   |             |  |  |  |
|                          | Mailing Address 323 Nightingale   |                     |                                     | 06 15 2007  | Y<br>7      |  |  |  |
|                          | City  | State               | Zip Code                            | Transaction ID: SA11A1.6619                                 |             |  |  |  |
|                          | mcallen   | TX                  | 78504                               | Amount of Each Receipt this Period                          |             |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                      | C                   |                                     | 250.00  | 0           |  |  |  |
|                          | Name of Employer selfemployed   | Occupation          | n                                   | contribution  |             |  |  |  |
|                          | selfemployed  | physcian            |                                     |   |             |  |  |  |
|                          | Receipt For:  | Aggregate           | e Year-to-Date ▼                    |   |             |  |  |  |
|                          | Primary General   |                     | 1500.00                             |   |             |  |  |  |
|                          | Other (specify) ▼   | 0 0                 |                                     |   |             |  |  |  |
| C.                       | Full Name (Last, First, Middle Initial) Jorge Kutugata  |                     |                                     | Date of Receipt   |             |  |  |  |
|                          | Mailing Address Rt 2 Box 522-K  |                     |                                     | M M / D D / Y Y Y Y O T D D D D D D D D D D D D D D D D D D |             |  |  |  |
|                          | City  | State               | Zip Code                            | Transaction ID: SA11A1.6373                                 |             |  |  |  |
|                          | weslaco   | TX                  | 78596                               | Amount of Each Receipt this Period                          |             |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                      | C                   |                                     | 250.0   | 0           |  |  |  |
|                          | Name of Employer selfemployed   | Occupation          |                                     | contribution  |             |  |  |  |
|                          |   |                     | e Year-to-Date ▼                    |   |             |  |  |  |
| Primary General          |   |                     | 1000.00                             |   |             |  |  |  |
|                          | Other (specify) ▼   | 0 0                 | 1000.00                             |   |             |  |  |  |
| s                        | UBTOTAL of Receipts This Page (optional)  |                     |                                     | 750.00  | 0           |  |  |  |
| $\vdash$                 |   |                     |                                     |   |             |  |  |  |
| T                        | OTAL This Period (last page this line number  | only)               | <b>)</b>                            |   |             |  |  |  |

| SCHEDULE A (FEC Form 3X) |  |                      | Use separate schedule(s)               | FOR LINE NUMBER: PAGE 64 / 123                 |
|--------------------------|--|----------------------|--|--|
|                          | EMIZED RECEIPTS  |                      | or each category of the                | (check only one)  X 11a 11b 11c 12             |
|                          |  |                      | Detailed Summary Page                  | 13 14 15 16 17                                 |
| Ar                       | y information copied from such Reports and St<br>for commercial purposes, other than using the | atements may         | not be sold or used by any person      | on for the purpose of soliciting contributions |
| 7                        | NAME OF COMMITTEE (In Full)  | 14.110 4.14 44.1     | areas or any pointed committee to      |  |
|                          | BORDER HEALTH FEDERAL PAC  |                      |  |  |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Jorge Kutugata                                      |                      |  | Date of Receipt                                |
|                          | Mailing Address Rt 2 Box 522-K   |                      |  | 05 11 2007                                     |
|                          | City   | State                | Zip Code                               | Transaction ID: SA11A1.6495                    |
|                          | weslaco  | TX                   | 78596                                  | Amount of Each Receipt this Period             |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |  | 250.00   |
|                          | Name of Employer selfemployed  | Occupation physician |  | contribution                                   |
|                          | Receipt For:   | Aggregate            | e Year-to-Date ▼                       |  |
|                          | Primary General Other (specify) ▼  |                      | 1250.00                                |  |
| В.                       | Full Name (Last, First, Middle Initial) Jorge Kutugata   |                      |  | Date of Receipt                                |
|                          | Mailing Address Rt 2 Box 522-K   |                      |  | 06 15 2007                                     |
|                          | City   | State                | Zip Code                               | Transaction ID: SA11A1.6620                    |
|                          | weslaco  | TX                   | 78596                                  | Amount of Each Receipt this Period             |
|                          | FEC ID number of contributing federal political committee.                                     | С                    |  | 250.00   |
|                          | Name of Employer selfemployed  | Occupation physician |  | contribution                                   |
|                          | Receipt For:   | Aggregate            | e Year-to-Date ▼                       |  |
|                          | Primary General Other (specify) ▼  |                      | 1500.00                                |  |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Ramiro Leal  |                      |  | Date of Receipt                                |
|                          | Mailing Address 601 Tulip  |                      |  | 0 4 1 2 2 0 0 7                                |
|                          | City   | State                | Zip Code                               | Transaction ID: SA11A1.6375                    |
|                          | mcallen  | TX                   | 78504                                  | Amount of Each Receipt this Period             |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |  | 250.00   |
|                          | Name of Employer selfemployed  | Occupation physician |  | contribution                                   |
|                          | Receipt For:   | Aggregate            | e Year-to-Date ▼                       |  |
|                          | Primary General Other (specify) ▼  |                      | 1000.00                                |  |
| s                        | UBTOTAL of Receipts This Page (optional)   |                      |  | 750.00   |
| T                        | OTAL This Period (last page this line number of  | only)                | ······································ |  |

| SCHEDULE A (FEC Form 3X) |   |                       | Use separate schedule(s)   | FOR LINE NUMBER:  | PAGE 65 / 123                      |
|--------------------------|---|-----------------------|--|---|------------------------------------|
|                          | ITEMIZED RECEIPTS   |                       | or each category of the  | (check only one)  X 11a 11b   | 11c  12                            |
|                          |   |                       | Detailed Summary Page  | 13 14   | 15 16 17                           |
| Ar                       | y information copied from such Reports and Sta<br>for commercial purposes, other than using the r | atements may          | not be sold or used by any personantes of any political committee to | on for the purpose of solicitions from solicitions from solicities. | ng contributions<br>uch committee. |
|                          | NAME OF COMMITTEE (In Full)   |                       |  |   |                                    |
|                          | BORDER HEALTH FEDERAL PAC   |                       |  |   |                                    |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Ramiro Leal  |                       |  | Date of Receipt   |                                    |
|                          | Mailing Address 601 Tulip   |                       |  | 0 5 D D 1 1   | 2007                               |
|                          | City  | State                 | Zip Code   | Transaction ID: SA  | 11A1.6497                          |
|                          | mcallen   | TX                    | 78504  | Amount of Each Rec  | eipt this Period                   |
|                          | FEC ID number of contributing federal political committee.  | С                     |  |   | 250.00                             |
|                          | Name of Employer selfemployed   | Occupation physician  |  | contribution  |                                    |
|                          | Receipt For:  | 1                     | e Year-to-Date ▼   |   |                                    |
|                          | Primary General Other (specify) ▼   | 0 0                   | 1250.00  |   |                                    |
| В.                       | Full Name (Last, First, Middle Initial) Ramiro Leal   |                       |  | Date of Receipt   |                                    |
|                          | Mailing Address 601 Tulip   |                       |  | 0 6 D D D 1 5   | 2007                               |
|                          | City  | State                 | Zip Code   | Transaction ID: SA  | 11A1.6622                          |
|                          | mcallen   | TX                    | 78504  | Amount of Each Rec  | eipt this Period                   |
|                          | FEC ID number of contributing federal political committee.  | С                     |  |   | 250.00                             |
|                          | Name of Employer selfemployed   | Occupation physician  |  | contribution  |                                    |
|                          | Receipt For:  | Aggregate             | e Year-to-Date ▼   |   |                                    |
|                          | Primary General Other (specify) ▼   |                       | 1500.00  |   |                                    |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Dale Linebarger   |                       |  | Date of Receipt   |                                    |
|                          | Mailing Address 901 West 9th Street #405  |                       |  | 04 / 12   | 2007                               |
|                          | City  | State                 | Zip Code   | Transaction ID: SA  |                                    |
|                          | austin  | TX                    | 78703  | Amount of Each Rec  | eipt this Period                   |
|                          | FEC ID number of contributing federal political committee.  | C                     |  |   | 250.00                             |
|                          | Name of Employer self-employed  | Occupation private in | vestor   | contribution  |                                    |
|                          |   |                       | e Year-to-Date ▼   |   |                                    |
|                          | Primary General Other (specify) ▼   |                       | 1000.00  | ]   |                                    |
| s                        | UBTOTAL of Receipts This Page (optional)  |                       |  |   | 750.00                             |
| T                        | OTAL This Period (last page this line number o  | nly)                  | ······································                               |   |                                    |

|           | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS                            |                       | Use separate schedule(s) or each category of the Detailed Summary Page | (check only one)  X 11a                                       |
|-----------|--|-----------------------|--|---|
| Ar        | y information copied from such Reports and Statem                  | nents may             | not be sold or used by any person                                      | 13 14 15 16 17 on for the purpose of soliciting contributions |
| or        | for commercial purposes, other than using the nam                  | e and add             | dress of any political committee to                                    | solicit contributions from such committee.                    |
| $\rangle$ | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC              |                       |  |   |
| Α.        | Full Name (Last, First, Middle Initial) Dale Linebarger            |                       |  | Date of Receipt   |
|           | Mailing Address 901 West 9th Street #405                           |                       |  | 05 11 7 2007  |
|           | City   | State<br>TX           | Zip Code<br>78703  | Transaction ID: SA11A1.6498                                   |
|           | austin  FEC ID number of contributing federal political committee. | C                     | 78703  | Amount of Each Receipt this Period  250.00                    |
|           | self-employed 1  | ccupation             |  | contribution  |
|           | Receipt For:  Primary General  Other (specify) ▼                   | Aggregate             | Year-to-Date ▼<br>1250.00  |   |
| В.        | Full Name (Last, First, Middle Initial) Dale Linebarger            |                       |  | Date of Receipt   |
|           | Mailing Address 901 West 9th Street #405                           | <u> </u>              |  | 06 15 2007  |
|           | City<br>austin   | State<br>TX           | Zip Code<br>78703  | Transaction ID: SA11A1.6623                                   |
|           | EEC ID assembles of a social business                              | C                     | 70705  | Amount of Each Receipt this Period  250.00                    |
|           | self-employed 1  | ccupation             |  | — contribution  |
|           | Receipt For:  Primary General  Other (specify) ▼                   | Aggregate             | Year-to-Date ▼<br>1500.00  |   |
| <u> </u>  | Full Name (Last, First, Middle Initial)<br>Alfredo Lopez           |                       |  | Date of Receipt   |
|           | Mailing Address 7609 N. 24th Circle                                |                       |  | 0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                   |
|           | •  | State                 | Zip Code   | Transaction ID: SA11A1.6377                                   |
|           |  | TX                    | 78504  | Amount of Each Receipt this Period                            |
|           | Todoral political continues.                                       | C                     |  | 250.00 contribution   |
|           | selfemployed   | ccupation<br>hysician | l  | Contribution  |
|           | Receipt For:  Primary General  Other (specify) ▼                   | Aggregate             | Year-to-Date ▼ 1000.00   |   |
| s         | UBTOTAL of Receipts This Page (optional)                           |                       |  | 750.00  |
| Т         | OTAL This Period (last page this line number only)                 |                       |  |   |

| SCHEDULE A (FEC Form 3X) |  |                      | Use separate schedule(s)            | FOR LINE NUMBER:             | PAGE 67 / 123            |
|--------------------------|--|----------------------|-------------------------------------|------------------------------|--------------------------|
|                          | ITEMIZED RECEIPTS  |                      | or each category of the             | (check only one)             | 1                        |
| ••                       |  |                      | Detailed Summary Page               | X 11a 11b 1                  | 11c   12<br>15   16   17 |
| Δη                       | w information copied from such Reports and S   | tatomente may        | , not be sold or used by any perso  |                              |                          |
| or                       | y information copied from such Reports and S for commercial purposes, other than using the | name and add         | dress of any political committee to | solicit contributions from s | such committee.          |
| $\setminus$              | NAME OF COMMITTEE (In Full)  |                      |                                     |                              |                          |
| $\rangle$                | BORDER HEALTH FEDERAL PAC  |                      |                                     |                              |                          |
| A.                       | Full Name (Last, First, Middle Initial) Alfredo Lopez                                      |                      |                                     | Date of Receipt              |                          |
|                          | Mailing Address 7609 N. 24th Circle  |                      | 7.0.                                | 05 11                        | 2007                     |
|                          | City   | State                | Zip Code                            | Transaction ID: SA           |                          |
|                          | mcallen  | TX                   | 78504                               | Amount of Each Red           | ceipt this Period        |
|                          | FEC ID number of contributing federal political committee.                                 | C                    |                                     |                              | 250.00                   |
|                          | Name of Employer selfemployed  | Occupation physician |                                     | contribution                 |                          |
|                          | Receipt For:   | Aggregate            | e Year-to-Date ▼                    |                              |                          |
|                          | Primary General  |                      | 1250.00                             | 1                            |                          |
|                          | Other (specify) ▼  | 0 0                  | 1230.00                             |                              |                          |
| В.                       |  |                      |                                     | Date of Receipt              |                          |
|                          | Mailing Address 7609 N. 24th Circle  |                      |                                     | 06 15 2007                   |                          |
|                          | City   | State                | Zip Code                            | Transaction ID: SA           |                          |
|                          | mcallen  | TX                   | 78504                               | Amount of Each Red           | ceipt this Period        |
|                          | FEC ID number of contributing federal political committee.                                 | C                    |                                     |                              | 250.00                   |
|                          | Name of Employer selfemployed  | Occupation physician |                                     | contribution                 |                          |
|                          | Receipt For:   |                      | e Year-to-Date ▼                    |                              |                          |
|                          | Primary General  |                      | 1500.00                             | 1                            |                          |
|                          | Other (specify) ▼  | 0 0                  | 1500.00                             |                              |                          |
| C.                       | Full Name (Last, First, Middle Initial)<br>Julio Lopez                                     |                      |                                     | Date of Receipt              |                          |
|                          | Mailing Address 1311 6th E. Street   |                      |                                     | 04 12                        | 2007                     |
|                          | City   | State                | Zip Code                            | Transaction ID: SA           |                          |
|                          | weslaco  | TX                   | 78596                               | Amount of Each Red           | ceipt this Period        |
|                          | FEC ID number of contributing federal political committee.                                 | C                    |                                     |                              | 102.62                   |
|                          | Name of Employer selfemployed  |                      | n<br>1                              | contribution                 |                          |
|                          |  | Aggregate            | e Year-to-Date ▼                    |                              |                          |
|                          | Primary General Other (specify) ▼  |                      | 378.63                              |                              |                          |
| Г                        |  |                      |                                     |                              |                          |
| s                        | UBTOTAL of Receipts This Page (optional)   |                      | ·····                               |                              | 602.62                   |
| T                        | OTAL This Period (last page this line number   | only)                |                                     | . L                          |                          |

| SCHEDULE A (FEC Form 3X) |  |                     | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 68 / 123             |
|--------------------------|--|---------------------|-------------------------------------|--|
| ıт                       | ITEMIZED RECEIPTS  |                     | or each category of the             | (check only one)                           |
| ••                       | LWIZED HEOLII 10   |                     | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17    |
| Ar                       | ny information copied from such Reports and Statemer       | nts may             | not be sold or used by any perso    |  |
| or                       | for commercial purposes, other than using the name a       | and add             | dress of any political committee to | solicit contributions from such committee. |
| $\setminus$              | NAME OF COMMITTEE (In Full)                                |                     |                                     |  |
| $ \rangle$               | BORDER HEALTH FEDERAL PAC                                  |                     |                                     |  |
|                          | E II Nicoco (Local Etcal Middle Lettel)                    |                     |                                     |  |
| Α.                       | Full Name (Last, First, Middle Initial) Julio Lopez        |                     |                                     | Date of Receipt                            |
|                          | Mailing Address 1311 6th E. Street                         |                     |                                     | M M / D D / Y Y Y Y                        |
|                          |  |                     |                                     | 05 11 2007                                 |
|                          | •  | ate                 | Zip Code                            | Transaction ID: SA11A1.6500                |
|                          | weslaco T  | <u>X</u>            | 78596                               | Amount of Each Receipt this Period         |
|                          | FEC ID number of contributing                              | Т.                  |                                     | 108.28                                     |
|                          | federal political committee.                               |                     |                                     |  |
|                          | Name of Employer Occ                                       | cupation            | า                                   | contribution                               |
|                          | selfemployed phy   | /sician             | 1                                   |  |
|                          |  | gregate             | Year-to-Date ▼                      |  |
|                          | Primary General  |                     | 486.91                              |  |
|                          | Other (specify)  |                     |                                     |  |
| _                        | Full Name (Last, First, Middle Initial)                    |                     |                                     |  |
| В.                       | ,  |                     |                                     | Date of Receipt                            |
|                          | Mailing Address 1311 6th E. Street                         |                     |                                     | M M / D D / Y Y Y                          |
|                          |  |                     |                                     | 06 15 2007                                 |
|                          | •  | ate                 | Zip Code                            | Transaction ID: SA11A1.6625                |
|                          | weslaco T  | Χ                   | 78596                               | Amount of Each Receipt this Period         |
|                          | FEC ID number of contributing federal political committee. | '                   |                                     | 87.68                                      |
|                          |  |                     |                                     | contribution                               |
|                          | a alternative d  | cupation            |                                     | Contribution                               |
|                          | pny  | /sician             |                                     |  |
|                          | Receipt For:  Primary General                              | gregate             | Year-to-Date ▼                      |  |
|                          | Other (specify)  |                     | 574.59                              |  |
|                          |  |                     |                                     | 1  |
| _                        | Full Name (Last, First, Middle Initial)                    |                     |                                     |  |
| C.                       | Salil Mangi  |                     |                                     | Date of Receipt                            |
|                          | Mailing Address 3801 Sundown Court East                    |                     |                                     | 0 4  |
|                          | City St  | ate                 | Zip Code                            | Transaction ID: SA11A1.6379                |
|                          | mcallen T  |                     | 78503                               | Amount of Each Receipt this Period         |
|                          | EEC ID number of contribution                              |                     |                                     |  |
|                          | federal political committee.                               | ١.                  |                                     | 250.00                                     |
|                          | Name of Frankrica  |                     |                                     | contribution                               |
|                          | coltomoloved   | cupation<br>/sician |                                     |  |
|                          |  |                     | Year-to-Date ▼                      | $\dashv$                                   |
|                          | Primary General  | 1 1                 |                                     |  |
|                          | Other (specify) ▼  |                     | 1000.00                             |  |
| _                        |  |                     |                                     |  |
|                          |  |                     |                                     | 445.96                                     |
| S                        | UBTOTAL of Receipts This Page (optional)                   |                     | ·······                             | 445.90                                     |
|                          | OTAL TIL D. 144  |                     |                                     |  |
| T                        | OTAL This Period (last page this line number only)         |                     | <b>.</b>                            |  |

## S

| SCHEDULE A (FEC Form 3X) |   |  |   | FOR LINE NUMBER: PAGE 69 / 123  |  |  |  |
|--------------------------|---|--|---|---|--|--|--|
| •                        |   | Use separate schedule(s) or each category of the |   | (check only one)  |  |  |  |
| ITEMIZED RECEIPTS        |   |  | Detailed Summary Page   | X 11a 11b 11c 12  |  |  |  |
|                          |   |  |   | 13 14 15 16 17  |  |  |  |
| Ar<br>or                 | ny information copied from such Reports and St<br>for commercial purposes, other than using the | atements may<br>name and add                     | not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |  |  |  |
| $\setminus$              | NAME OF COMMITTEE (In Full)   |  |   |   |  |  |  |
|                          | BORDER HEALTH FEDERAL PAC   |  |   |   |  |  |  |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Salil Mangi  |  |   | Date of Receipt   |  |  |  |
|                          | Mailing Address 3801 Sundown Court E  | ast  |   | 05 11 7 2007  |  |  |  |
|                          | City  | State  | Zip Code  | Transaction ID: SA11A1.6501   |  |  |  |
|                          | mcallen   | TX   | 78503   | Amount of Each Receipt this Period  |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                      | C  |   | 250.00  |  |  |  |
|                          | Name of Employer selfemployed   | Occupation                                       |   | contribution  |  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate  | e Year-to-Date ▼<br>1250.00   |   |  |  |  |
| —<br>В.                  | Full Name (Last, First, Middle Initial)<br>Salil Mangi  |  |   | Date of Receipt   |  |  |  |
|                          | Mailing Address 3801 Sundown Court E  | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y      |   |   |  |  |  |
|                          | City  | State  | Zip Code  | Transaction ID: SA11A1.6627   |  |  |  |
|                          | mcallen   | TX   | 78503   | Amount of Each Receipt this Period  |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                      | C  |   | 250.00  |  |  |  |
|                          | Name of Employer selfemployed   | Occupation physician                             |   | contribution  |  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate  | e Year-to-Date ▼<br>1500.00   |   |  |  |  |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Carlos Manrique   |  |   | Date of Receipt   |  |  |  |
|                          | Mailing Address 116 Cardinal  |  |   | 0 4 1 2 2 0 0 7   |  |  |  |
|                          | City  | State  | Zip Code  | Transaction ID: SA11A1.6380   |  |  |  |
|                          | <u>mcallen</u>  | TX   | 78504   | Amount of Each Receipt this Period  |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                      | C  |   | 250.00  |  |  |  |
|                          | Name of Employer selfemployed   | Occupation physician                             |   | contribution  |  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate  | e Year-to-Date ▼<br>1000.00   |   |  |  |  |
| s                        | SUBTOTAL of Receipts This Page (optional)   |  |   | 750.00  |  |  |  |
| $\Gamma^{-}$             |   |  |   |   |  |  |  |

## S

|             | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  |                               | Use separate schedule(s) or each category of the                          | FOR LINE NUMBER: PAGE 70 / 123 (check only one)   |
|-------------|--|-------------------------------|---|---|
|             | EIVIIZED NECEIP 13   |                               | Detailed Summary Page   | X   11a   11b   11c   12   13   14   15   16   17   |
| Ar          | ny information copied from such Reports and S<br>for commercial purposes, other than using the | tatements may<br>name and add | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions oscilicit contributions from such committee. |
| $\setminus$ | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  |                               |   |   |
| Α.          | Full Name (Last, First, Middle Initial) Carlos Manrique Mailing Address 116 Cardinal           |                               |   | Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y                    |
|             | City<br>mcallen  | State<br>TX                   | Zip Code<br>78504   | Transaction ID: SA11A1.6502  Amount of Each Receipt this Period                             |
|             | FEC ID number of contributing federal political committee.                                     | C                             |   | 250.00  |
|             | Name of Employer selfemployed  | Occupation physician          |   | contribution  |
|             | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                     | e Year-to-Date ▼<br>1250.00   |   |
| В.          | Full Name (Last, First, Middle Initial)<br>Carlos Manrique                                     |                               |   | Date of Receipt   |
|             | Mailing Address 116 Cardinal   |                               |   | 06 15 2007  |
|             | City   | State                         | Zip Code  | Transaction ID: SA11A1.6628   |
|             | mcallen  | TX                            | 78504   | Amount of Each Receipt this Period  |
|             | FEC ID number of contributing federal political committee.                                     | C                             |   | 250.00  |
|             | Name of Employer selfemployed  | Occupation physiciar          |   | contribution  |
|             | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                     | e Year-to-Date ▼<br>1500.00   |   |
| <b>C</b> .  | Full Name (Last, First, Middle Initial)<br>Guillermo Marquez                                   |                               |   | Date of Receipt   |
|             | Mailing Address 1702 Trinity Road  |                               |   | 04 12 2007  |
|             | City<br>mission  | State<br>TX                   | Zip Code<br>78572   | Transaction ID: SA11A1.6381  Amount of Each Receipt this Period                             |
|             | FEC ID number of contributing federal political committee.                                     | C                             | 10372   | 250.00  |
|             | Name of Employer selfemployed  | Occupation physiciar          | 1   | contribution  |
|             | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                     | e Year-to-Date ▼<br>1000.00   |   |
| s           | UBTOTAL of Receipts This Page (optional)   |                               |   | 750.00  |
| Т           | OTAL This Period (last page this line number   | only)                         |   |   |

| S           | SCHEDULE A (FEC Form 3X)  |                      | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 71 / 123   |
|-------------|---|----------------------|-------------------------------------|--|
|             | ITEMIZED RECEIPTS   |                      | or each category of the             | (check only one)   |
| •••         | TEMPLED REGENTO   |                      | Detailed Summary Page               | X 11a 11b 11c 12   |
| _           | ., ., ., ., ., ., ., ., ., ., ., ., ., .  |                      |                                     | 13 14 15 16 17   |
| or          | ly information copied from such Reports and St<br>for commercial purposes, other than using the | name and add         | dress of any political committee to | on for the purpose of soliciting contributions as solicit contributions from such committee. |
| $\setminus$ | NAME OF COMMITTEE (In Full)   |                      |                                     |  |
|             | BORDER HEALTH FEDERAL PAC   |                      |                                     |  |
| A.          | Full Name (Last, First, Middle Initial) Guillermo Marquez                                       |                      |                                     | Date of Receipt  |
|             | Mailing Address 1702 Trinity Road   |                      |                                     | 05 11 2007   |
|             | City  | State                | Zip Code                            | Transaction ID: SA11A1.6503  |
|             | mission   | TX                   | 78572                               | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing federal political committee.                                      | C                    |                                     | 250.00   |
|             | Name of Employer selfemployed   | Occupation physician |                                     | contribution   |
|             | Receipt For:  | Aggregate            | Year-to-Date ▼                      |  |
|             | Primary General   |                      | 1250.00                             | 7  |
|             | Other (specify) ▼   |                      | 1230.00                             |  |
| В.          | Full Name (Last, First, Middle Initial)<br>Guillermo Marquez                                    |                      |                                     | Date of Receipt  |
|             | Mailing Address 1702 Trinity Road   |                      |                                     | 06 15 2007   |
|             | City  | State                | Zip Code                            | Transaction ID: SA11A1.6629  |
|             | mission   | TX                   | 78572                               | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing federal political committee.                                      | C                    |                                     | 250.00 contribution  |
|             | Name of Employer selfemployed   | Occupation physician |                                     | Contribution   |
|             | Receipt For:  | Aggregate            | Year-to-Date ▼                      |  |
|             | Primary General   |                      | 1500.00                             | 1  |
|             | Other (specify) ▼   |                      | 1300.00                             |  |
| C.          | Full Name (Last, First, Middle Initial)<br>Agustin Martinez                                     |                      |                                     | Date of Receipt  |
|             | Mailing Address 7603 N. 2nd Lane  |                      |                                     | 04 12 2007   |
|             | City  | State                | Zip Code                            | Transaction ID: SA11A1.6382  |
|             | mcallen   | TX                   | 78504                               | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing federal political committee.                                      | C                    |                                     | 250.00   |
|             | Name of Employer selfemployed   | Occupation physician |                                     | contribution   |
|             | Receipt For:  |                      | Year-to-Date ▼                      |  |
|             | Primary General Other (specify) ▼   | 0 0                  | 1000.00                             |  |
| s           | UBTOTAL of Receipts This Page (optional)  |                      |                                     | 750.00   |
| H           | OTAL This Period (last page this line number of   |                      |                                     |  |

| SCHEDULE A (FEC Form 3X) |  |                         | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 72 / 123               |
|--------------------------|--|-------------------------|-------------------------------------|--|
| ITEMIZED RECEIPTS        |  | or each category of the |                                     | (check only one)                             |
| ••                       |  |                         | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17      |
| Δr                       | w information copied from such Reports and S   | tatements may           | y not he sold or used by any ners   |  |
| or                       | ly information copied from such Reports and S<br>for commercial purposes, other than using the | name and add            | dress of any political committee to | o solicit contributions from such committee. |
| $\setminus$              | NAME OF COMMITTEE (In Full)  |                         |                                     |  |
| $ \rangle$               | BORDER HEALTH FEDERAL PAC  |                         |                                     |  |
| <u>/</u>                 | Full Name (Last, First, Middle Initial)  |                         |                                     |  |
| A.                       | Agustin Martinez   |                         |                                     | Date of Receipt                              |
|                          | Mailing Address 7603 N. 2nd Lane   |                         |                                     | 05 11 2007                                   |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6504                  |
|                          | mcallen  | TX                      | 78504                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing  |                         |                                     |  |
|                          | federal political committee.   | C                       |                                     | 250.00                                       |
|                          | Name of Employer selfemployed  | Occupation              | 1                                   | contribution                                 |
|                          | selfemployed   | physician               | 1                                   |  |
|                          | Receipt For:   | Aggregate               | Year-to-Date ▼                      |  |
|                          | Primary General  |                         | 1250.00                             | 1  |
|                          | Other (specify) ▼  | 0 0                     |                                     | 1  |
| _                        | Full Name (Last, First, Middle Initial)  |                         |                                     |  |
| В.                       | 3  |                         |                                     | Date of Receipt                              |
|                          | Mailing Address 7603 N. 2nd Lane   |                         |                                     | 06 15 2007                                   |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6631                  |
|                          | mcallen  | TX                      | 78504                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing  | С                       |                                     | 250.00                                       |
|                          | federal political committee.   | 0                       |                                     |  |
|                          | Name of Employer selfemployed  | Occupation              |                                     | contribution                                 |
|                          |  | physician               |                                     |  |
|                          | Receipt For:  Primary  General   | Aggregate               | e Year-to-Date ▼                    |  |
|                          | Other (specify)  |                         | 1500.00                             |  |
|                          |  |                         |                                     | 1  |
| C.                       | Full Name (Last, First, Middle Initial) Ricardo Martinez                                       |                         |                                     | Date of Receipt                              |
| ٠.                       | Mailing Address 1903 W. Smith  |                         |                                     | M M / D D / Y Y Y Y                          |
|                          |  |                         |                                     | 04 12 2007                                   |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6383                  |
|                          | edinburg   | TX                      | 78539                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing federal political committee.                                     | C                       |                                     | 250.00                                       |
|                          | Name of Freedom  | 10                      |                                     | contribution                                 |
|                          | Name of Employer selfemployed  | Occupation physician    |                                     |  |
|                          | Receipt For:   | <del> </del>            | Year-to-Date ▼                      | _  |
|                          | Primary General  |                         |                                     | 1  |
|                          | Other (specify) ▼  |                         | 1000.00                             | 1  |
| Г                        |  |                         |                                     |  |
| s                        | UBTOTAL of Receipts This Page (optional)   |                         |                                     | 750.00                                       |
| $\vdash$                 |  |                         |                                     |  |
| T                        | <b>OTAL</b> This Period (last page this line number  | only)                   |                                     |  |

| SCHEDULE A (FEC Form 3X) |   |  | Use separate schedule(s)   | FOR LINE NUMBER: PAGE 73 / 123   |  |  |  |
|--------------------------|---|--|--|--|--|--|--|
|                          | EMIZED RECEIPTS   | or each category of the  |  | (check only one)   |  |  |  |
| TI LIMIZED RECEIP 13     |   |  | Detailed Summary Page  | X 11a 11b 11c 12   |  |  |  |
| _                        |   |  |  | 13 14 15 16 17   |  |  |  |
| or                       | y information copied from such Reports and S<br>for commercial purposes, other than using the   | name and add   | r not be sold or used by any pers<br>dress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |  |  |  |
|                          | NAME OF COMMITTEE (In Full)   |  |  |  |  |  |  |
|                          | BORDER HEALTH FEDERAL PAC   |  |  |  |  |  |  |
| A.                       | Full Name (Last, First, Middle Initial) Ricardo Martinez  |  |  | Date of Receipt  |  |  |  |
|                          | Mailing Address 1903 W. Smith   |  |  | 05 11 7 2007   |  |  |  |
|                          | City  | State  | Zip Code   | Transaction ID: SA11A1.6505  |  |  |  |
|                          | edinburg  | TX   | 78539  | Amount of Each Receipt this Period   |  |  |  |
|                          | FEC ID number of contributing federal political committee.  | C  |  | 250.00   |  |  |  |
|                          | Name of Employer selfemployed   | Occupation physician   |  | contribution   |  |  |  |
|                          | Receipt For:  |  | Year-to-Date ▼   |  |  |  |  |
|                          | Primary General   | 1 1  | 1250.00  | 7  |  |  |  |
|                          | Other (specify) ▼   | 0 0  | 1230.00  |  |  |  |  |
| В.                       | Full Name (Last, First, Middle Initial)<br>Ricardo Martinez   |  |  | Date of Receipt  |  |  |  |
|                          | Mailing Address 1903 W. Smith   | 06 15 7 2007   |  |  |  |  |  |
|                          | City  | State  | Zip Code   | Transaction ID: SA11A1.6633  |  |  |  |
|                          | edinburg  | TX   | 78539  | Amount of Each Receipt this Period   |  |  |  |
|                          | FEC ID number of contributing   |  | 1 1 1 1 1  | 250.00   |  |  |  |
|                          | federal political committee.  | C  |  | 250.00   |  |  |  |
|                          |   | Occupation physician   |  | contribution 250.00  |  |  |  |
|                          | federal political committee.  Name of Employer  | Occupation physician   |  |  |  |  |  |
|                          | federal political committee.  Name of Employer selfemployed   | Occupation physician   | 1  |  |  |  |  |
|                          | federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  | Occupation physician   | Year-to-Date ▼   | contribution   |  |  |  |
| C.                       | federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General  Other (specify) ▼   | Occupation physician   | Year-to-Date ▼   |  |  |  |  |
| C.                       | federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial) Santos Martinez  | Occupation physician   | Year-to-Date ▼   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                 |  |  |  |
| C.                       | federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial) Santos Martinez  Mailing Address 125 East Yucca  | Occupation physician Aggregate                                     | Year-to-Date ▼ 1500.00   | Date of Receipt  |  |  |  |
| C.                       | federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  Santos Martinez  Mailing Address 125 East Yucca  City   | Occupation physician Aggregate  State                              | Year-to-Date ▼  1500.00  Zip Code  | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                 |  |  |  |
| C.                       | federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial) Santos Martinez  Mailing Address 125 East Yucca  City mcallen  FEC ID number of contributing   | Occupation physician Aggregate  State TX                           | Year-to-Date ▼  1500.00  Zip Code 78504                                  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                               |  |  |  |
| C.                       | federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial) Santos Martinez  Mailing Address 125 East Yucca  City  mcallen  FEC ID number of contributing federal political committee.  Name of Employer   | Occupation physician Aggregate  State TX  C  Occupation private in | Year-to-Date ▼  1500.00  Zip Code 78504                                  | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                 |  |  |  |
| C.                       | federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Santos Martinez  Mailing Address 125 East Yucca  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer self-employed   | Occupation physician Aggregate  State TX  C  Occupation private in | Year-to-Date ▼  1500.00  Zip Code 78504  vestor                          | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                 |  |  |  |
|                          | federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Santos Martinez  Mailing Address 125 East Yucca  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer self-employed  Receipt For: Primary General Other (specify) ▼ | State TX  C  Occupation private in Aggregate                       | Zip Code 78504  Vestor Year-to-Date  1000.00                             | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                 |  |  |  |
|                          | federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial) Santos Martinez  Mailing Address 125 East Yucca  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer self-employed  Receipt For:  Primary General                 | State TX  C  Occupation private in Aggregate                       | Zip Code 78504  Vestor Year-to-Date  1000.00                             | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                               |  |  |  |

| SCHEDULE A (FEC Form 3X) |  |   |                                       | FOR LINE NUMBER: PAGE 74 / 123                         |  |  |  |
|--------------------------|--|---|---------------------------------------|--|--|--|--|
| `                        |  |   | Use separate schedule(s)              | (check only one)                                       |  |  |  |
| ITEMIZED RECEIPTS        |  | or each category of the Detailed Summary Page |                                       | X 11a 11b 11c 12                                       |  |  |  |
|                          |  |   | Detailed Suffiffially Fage            | 13 14 15 16 17   |  |  |  |
| Ar                       | y information copied from such Reports and Sta             | atements may                                  | y not be sold or used by any person   | on for the purpose of soliciting contributions         |  |  |  |
| or                       | for commercial purposes, other than using the r            | name and add                                  | dress of any political committee to   | solicit contributions from such committee.             |  |  |  |
|                          | NAME OF COMMITTEE (In Full)                                |   |                                       |  |  |  |  |
|                          | BORDER HEALTH FEDERAL PAC                                  |   |                                       |  |  |  |  |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Santos Martinez |   |                                       | Date of Receipt  |  |  |  |
|                          | Mailing Address 125 East Yucca                             |   |                                       | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y            |  |  |  |
|                          | City   | State   | Zip Code                              | 0 5 1 1 2 0 0 7  Transaction ID: SA11A1.6506           |  |  |  |
|                          | <u>mcallen</u>   | TX  | 78504                                 | Amount of Each Receipt this Period                     |  |  |  |
|                          | FEC ID number of contributing                              |   |                                       |  |  |  |  |
|                          | federal political committee.                               | C   |                                       | 250.00   |  |  |  |
|                          | Name of Employer self-employed                             | Occupation                                    | n                                     | contribution   |  |  |  |
|                          |  | private in                                    |                                       |  |  |  |  |
|                          | Receipt For:  Primary  General                             | Aggregate                                     | e Year-to-Date ▼                      |  |  |  |  |
|                          | Other (specify)  |   | 1250.00                               |  |  |  |  |
|                          | care (eposity) \   |   |                                       |  |  |  |  |
| В.                       | Full Name (Last, First, Middle Initial) Santos Martinez    |   |                                       | Date of Receipt  |  |  |  |
|                          | Mailing Address 125 East Yucca                             |   |                                       | M M / D D / Y Y Y Y                                    |  |  |  |
|                          | 21   | 7.0.1   | 06 15 2007                            |  |  |  |  |
|                          | City   | State   | Zip Code                              | Transaction ID: SA11A1.6634                            |  |  |  |
|                          | mcallen  | TX  | 78504                                 | Amount of Each Receipt this Period                     |  |  |  |
|                          | FEC ID number of contributing federal political committee. | C   |                                       | 250.00   |  |  |  |
|                          |  |   |                                       | contribution   |  |  |  |
|                          | Name of Employer self-employed                             | Occupation private in                         |                                       |  |  |  |  |
|                          | Receipt For:   | _   '   | e Year-to-Date ▼                      |  |  |  |  |
|                          | Primary General  | 39 - 5  | · · · · · · · · · · · · · · · · · · · | 1  |  |  |  |
|                          | Other (specify) ▼  |   | 1500.00                               |  |  |  |  |
| _                        | Full Name (Last, First, Middle Initial)                    |   |                                       | +  |  |  |  |
| C.                       | Pedro McDougal   |   |                                       | Date of Receipt  |  |  |  |
|                          | Mailing Address 1516 Iris                                  |   |                                       | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ |  |  |  |
|                          | City   | State   | Zip Code                              | Transaction ID: SA11A1.6385                            |  |  |  |
|                          | mcallen  | TX  | 78501                                 | Amount of Each Receipt this Period                     |  |  |  |
|                          | FEC ID number of contributing federal political committee. | С   |                                       | 250.00   |  |  |  |
|                          |  |   |                                       | contribution   |  |  |  |
|                          | Name of Employer selfemployed                              | Occupation physiciar                          |                                       |  |  |  |  |
|                          | Receipt For:   | <u> </u>                                      | Year-to-Date ▼                        |  |  |  |  |
|                          | Primary General  |   |                                       | 1  |  |  |  |
|                          | Other (specify) ▼  | 0 0   | 1000.00                               |  |  |  |  |
| _                        |  |   |                                       |  |  |  |  |
|                          |  |   |                                       | 750.00   |  |  |  |
| Ls                       | UBTOTAL of Receipts This Page (optional)                   |   | ······                                |  |  |  |  |

| _         |  |            |                                     | FOR LINE NUMBER: PAGE 75 / 123                |
|-----------|--|------------|-------------------------------------|---|
| 5(        | CHEDULE A (FEC Form 3X)                                    |            | Use separate schedule(s)            | (check only one)                              |
| IT        | EMIZED RECEIPTS  |            | or each category of the             |   |
| •         |  |            | Detailed Summary Page               | X 11a 11b 11c 12                              |
|           |  |            |                                     | 13 14 15 16 17                                |
| An        | y information copied from such Reports and State           | ements may | not be sold or used by any perso    | n for the purpose of soliciting contributions |
| or        | for commercial purposes, other than using the na           | me and add | aress of any political committee to | solicit contributions from such committee.    |
|           | NAME OF COMMITTEE (In Full)                                |            |                                     |   |
| $\rangle$ | BORDER HEALTH FEDERAL PAC                                  |            |                                     |   |
| <u>/_</u> |  |            |                                     |   |
| _         | Full Name (Last, First, Middle Initial)                    |            |                                     |   |
| ٩.        | Pedro McDougal   |            |                                     | Date of Receipt                               |
|           | Mailing Address 1516 Iris                                  |            |                                     | M M / D D / Y Y Y Y                           |
|           |  |            |                                     | 05 11 2007                                    |
|           | City   | State      | Zip Code                            | Transaction ID: SA11A1.6507                   |
|           | mcallen  | TX         | 78501                               | Amount of Each Receipt this Period            |
|           | FEC ID number of contributing                              |            |                                     | 050.00  |
|           | federal political committee.                               | C          |                                     | 250.00  |
|           |  |            |                                     | contribution                                  |
|           | celfemployed '   | Occupation |                                     | Contribution                                  |
|           | Seliemployed   | physiciar  | 1                                   |   |
|           | Receipt For:   | Aggregate  | e Year-to-Date ▼                    |   |
|           | Primary General  |            | 1050.00                             | 1   |
|           | Other (specify) ▼  |            | 1250.00                             |   |
|           |  |            |                                     |   |
|           | Full Name (Last, First, Middle Initial)                    |            |                                     |   |
| 3.        | Pedro McDougal   |            |                                     | Date of Receipt                               |
|           | Mailing Address 1516 Iris                                  |            |                                     | M M / D D / Y Y Y Y                           |
|           | 5 10.0 me  |            |                                     | 06 15 2007                                    |
|           | City   | State      | Zip Code                            | Transaction ID: SA11A1.6635                   |
|           | mcallen  | TX         | 78501                               | Amount of Each Receipt this Period            |
|           |  | 171        | 70001                               | Amount of Each receipt this remod             |
|           | FEC ID number of contributing federal political committee. | C          |                                     | 250.00  |
|           | rederai politicai committee.                               |            |                                     |   |
|           | Name of Employer   | Occupation | n                                   | contribution                                  |
|           | colfomployed   | physiciar  |                                     |   |
|           | Receipt For:   |            | e Year-to-Date ▼                    |   |
|           | Primary General  | 1.99.19    |                                     | 1   |
|           | Other (specify) ▼  |            | 1500.00                             |   |
|           |  | 0 0        | 0 0 0 0 0 0 0                       |   |
|           | Full Name (Last, First, Middle Initial)                    |            |                                     |   |
| Э.        | Bertha Medina  |            |                                     | Date of Receipt                               |
|           | Mailing Address 1300 1 1/2 Street                          |            |                                     | M M / D D / Y Y Y Y                           |
|           | 1300 1 1/2 311661  |            |                                     | 04 12 2007                                    |
|           | City   | State      | Zip Code                            | Transaction ID: SA11A1.6386                   |
|           | mcallen  | TX         | 78501                               | Amount of Each Receipt this Period            |
|           |  | 1/         | 78301                               | Amount of Each Necept this Period             |
|           | FEC ID number of contributing                              | C          |                                     | 250.00  |
|           | federal political committee.                               |            |                                     |   |
|           | Name of Employer   | Occupation | n                                   | contribution                                  |
|           | celfemployed   | physician  |                                     |   |
|           | Receipt For:   |            | Year-to-Date ▼                      | -   |
|           | Primary General  | riggrogate | real to Bate V                      |   |
|           | Other (specify)  | ' '        | 1000.00                             |   |
|           | (openij) ▼   |            | 0 0 0 0 0 0 0                       | 1   |
|           |  |            |                                     |   |
| _         |  |            |                                     | 750.00  |
| SI        | JBTOTAL of Receipts This Page (optional)                   | ·····      | ······                              | 700.00  |
|           |  |            |                                     |   |
| T         | OTAL This Period (last page this line number only          | y)         | <b>&gt;</b>                         |   |

| SCHEDULE A (FEC Form 3X) |   |                      | Use separate schedule(s)                      | FOR LINE NUMBER: PAGE 76 / 123                                  |             |  |  |  |
|--------------------------|---|----------------------|---|---|-------------|--|--|--|
|                          | EMIZED RECEIPTS   |                      | or each category of the Detailed Summary Page | (check only one)    X   11a                                     | <b>]</b> 17 |  |  |  |
| Ar                       | y information copied from such Reports and S<br>for commercial purposes, other than using the | tatements may        | y not be sold or used by any perso            | on for the purpose of soliciting contributions                  |             |  |  |  |
|                          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |                      | aroso or arry pointed committee to            |   |             |  |  |  |
| Α.                       | Full Name (Last, First, Middle Initial) Bertha Medina  Mailing Address 1300 1 1/2 Street      |                      |   | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y    |             |  |  |  |
|                          | City mcallen  | State<br>TX          | Zip Code<br>78501                             | Transaction ID: SA11A1.6508  Amount of Each Receipt this Period |             |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                    | C                    |   | 250.00  |             |  |  |  |
|                          | Name of Employer selfemployed   | Occupation physician | 1   | - contribution  |             |  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>1250.00                   | ]   |             |  |  |  |
| В.                       |   |                      |   | Date of Receipt   |             |  |  |  |
|                          |   |                      |   | 06 15 2007  |             |  |  |  |
|                          | City  | State                | Zip Code                                      | Transaction ID: SA11A1.6637                                     |             |  |  |  |
|                          | mcallen  FEC ID number of contributing federal political committee.                           | C                    | 78501   | Amount of Each Receipt this Period  250.00                      |             |  |  |  |
|                          | Name of Employer selfemployed   | Occupation physiciar | 1   | - contribution  |             |  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼<br>1500.00                   | ]   |             |  |  |  |
| C.                       | Full Name (Last, First, Middle Initial) Manuel Mercado Mailing Address 3002 Santa Susana      |                      |   | Date of Receipt   |             |  |  |  |
|                          | City  | State                | Zip Code                                      | 0 4 1 2 2 0 0 7<br>Transaction ID: SA11A1.6387                  |             |  |  |  |
|                          | mission   | TX                   | 78572   | Amount of Each Receipt this Period                              |             |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                    | C                    |   | 250.00  |             |  |  |  |
|                          | Name of Employer selfemployed   | Occupation physician | 1   | contribution  |             |  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate            | e Year-to-Date ▼ 1000.00                      |   |             |  |  |  |
| s                        | UBTOTAL of Receipts This Page (optional)  |                      | )   | 750.00  |             |  |  |  |
| Т                        | OTAL This Period (last page this line number  | only)                |   |   |             |  |  |  |

|                          | PHEDIII E A /EEC Form 2V\   |                                  |                                     | FOR LINE NUMBER: PAGE 77 / 123  |
|--------------------------|---|----------------------------------|-------------------------------------|---|
| SCHEDULE A (FEC Form 3X) |   |                                  | Use separate schedule(s)            | (check only one)  |
| ITEMIZED RECEIPTS        |   |                                  | or each category of the             | X 11a 11b 11c 12  |
|                          |   |                                  | Detailed Summary Page               | 13 14 15 16 17  |
| Δn                       | y information copied from such Reports and St   | atomonte mai                     | , not be sold or used by any perso  | •   |
| or                       | for commercial purposes, other than using the   | name and add                     | dress of any political committee to | o solicit contributions from such committee.  |
| $\overline{}$            | NAME OF COMMITTEE (In Full)   |                                  |                                     |   |
| \                        | BORDER HEALTH FEDERAL PAC   |                                  |                                     |   |
| /                        | BONDER HEALTH EDERAL FAO  |                                  |                                     |   |
|                          | Full Name (Last, First, Middle Initial)   |                                  |                                     |   |
| ۹.                       | Manuel Mercado  |                                  |                                     | Date of Receipt   |
|                          | Mailing Address 3002 Santa Susana   |                                  |                                     | M M / D D / Y Y Y Y   |
|                          |   |                                  |                                     | 05 11 2007  |
|                          | City  | State                            | Zip Code                            | Transaction ID: SA11A1.6509   |
|                          | mission   | TX                               | 78572                               | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing   |                                  |                                     |   |
|                          | federal political committee.  | C                                |                                     | 250.00  |
|                          |   |                                  |                                     | contribution  |
|                          | Name of Employer selfemployed   | Occupation                       |                                     | Contribution  |
|                          | · · · · · · · · · · · · · · · · · · ·   | physiciar                        |                                     |   |
|                          | Receipt For:  | Aggregate                        | e Year-to-Date ▼                    |   |
|                          | Primary General   |                                  | 1250.00                             | 1   |
|                          | Other (specify)   |                                  | 1230.00                             |   |
|                          |   |                                  |                                     |   |
| ,                        | Full Name (Last, First, Middle Initial)   |                                  |                                     | Data of Bassist   |
| 5.                       | Manuel Mercado  |                                  |                                     | Date of Receipt   |
|                          | Mailing Address 3002 Santa Susana   |                                  |                                     | 06 15 2007  |
|                          | City  | State                            | Zip Code                            |   |
|                          | mission   | TX                               | •                                   | Transaction ID: SA11A1.6638   |
|                          | 111551011   |                                  | 78572                               | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.  | C                                |                                     | 250.00  |
|                          | rederal political committee.  |                                  |                                     |   |
|                          | Name of Employer  | Occupation                       | n                                   | contribution  |
|                          | selfemployed  | physiciar                        | 1                                   |   |
|                          | Receipt For:  | Aggregate                        | e Year-to-Date ▼                    |   |
|                          | D: 0 .  |                                  | * * * * * <u>*</u>                  | 7   |
|                          | Primary General   |                                  |                                     |   |
|                          | Other (specify)   |                                  | 1500.00                             |   |
|                          |   |                                  | 1500.00                             |   |
|                          | Other (specify) ▼  Full Name (Last, First, Middle Initial)  |                                  | 1500.00                             |   |
| <b></b>                  | Other (specify)  Full Name (Last, First, Middle Initial) Carlos Mohamed   | 0 0                              | 1500.00                             | Date of Receipt   |
| <b>-</b> .               | Other (specify) ▼  Full Name (Last, First, Middle Initial)  |                                  | 1500.00                             | M M / D D / Y Y Y Y   |
| <b>.</b> .               | Other (specify) ▼  Full Name (Last, First, Middle Initial) Carlos Mohamed  Mailing Address 5408 N. Cynthia  | Chair                            |                                     | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| <b>D</b> .               | Other (specify)  Full Name (Last, First, Middle Initial) Carlos Mohamed Mailing Address 5408 N. Cynthia City  | State                            | Zip Code                            | 0 4 1 2 2 0 0 7  Transaction ID: SA11A1.6388  |
| <b>D</b> .               | Other (specify) ▼  Full Name (Last, First, Middle Initial) Carlos Mohamed  Mailing Address 5408 N. Cynthia  | State<br>TX                      |                                     | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
| <b>D</b> .               | Other (specify)  Full Name (Last, First, Middle Initial) Carlos Mohamed Mailing Address 5408 N. Cynthia  City mcallen  FEC ID number of contributing  | TX                               | Zip Code                            | 0 4 1 2 2 0 0 7  Transaction ID: SA11A1.6388  |
| <b></b><br>C.            | Other (specify)  Full Name (Last, First, Middle Initial) Carlos Mohamed Mailing Address 5408 N. Cynthia  City mcallen   |                                  | Zip Code                            | Transaction ID: SA11A1.6388  Amount of Each Receipt this Period  250.00               |
| <b>D</b> .               | Other (specify) ▼  Full Name (Last, First, Middle Initial) Carlos Mohamed  Mailing Address 5408 N. Cynthia  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer  | TX                               | Zip Code<br>78504                   | Transaction ID: SA11A1.6388  Amount of Each Receipt this Period                       |
| <b>C</b> .               | Full Name (Last, First, Middle Initial) Carlos Mohamed Mailing Address 5408 N. Cynthia  City mcallen  FEC ID number of contributing federal political committee.  | TX C                             | Zip Code<br>78504                   | Transaction ID: SA11A1.6388  Amount of Each Receipt this Period  250.00               |
| Э.                       | Other (specify) ▼  Full Name (Last, First, Middle Initial) Carlos Mohamed  Mailing Address 5408 N. Cynthia  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer  | C Occupation physician           | Zip Code<br>78504                   | Transaction ID: SA11A1.6388  Amount of Each Receipt this Period  250.00               |
| <b>D.</b>                | Full Name (Last, First, Middle Initial) Carlos Mohamed Mailing Address 5408 N. Cynthia  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed   | C Occupation physician           | Zip Code<br>78504                   | Transaction ID: SA11A1.6388  Amount of Each Receipt this Period  250.00               |
| <b>C</b> .               | Other (specify) ▼  Full Name (Last, First, Middle Initial) Carlos Mohamed  Mailing Address 5408 N. Cynthia  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:                 | C Occupation physician           | Zip Code<br>78504                   | Transaction ID: SA11A1.6388  Amount of Each Receipt this Period  250.00               |
| <b>D.</b>                | Other (specify) ▼  Full Name (Last, First, Middle Initial) Carlos Mohamed  Mailing Address 5408 N. Cynthia  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For: Primary General | C Occupation physician           | Zip Code<br>78504                   | Transaction ID: SA11A1.6388  Amount of Each Receipt this Period  250.00               |
| <b>D.</b>                | Other (specify) ▼  Full Name (Last, First, Middle Initial) Carlos Mohamed  Mailing Address 5408 N. Cynthia  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For: Primary General | C Occupation physician           | Zip Code<br>78504                   | Transaction ID: SA11A1.6388  Amount of Each Receipt this Period  250.00  contribution |
| S.                       | Other (specify) ▼  Full Name (Last, First, Middle Initial) Carlos Mohamed  Mailing Address 5408 N. Cynthia  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For: Primary General | C Occupation physician Aggregate | Zip Code<br>78504                   | Transaction ID: SA11A1.6388  Amount of Each Receipt this Period  250.00  contribution |
| S.                       | Full Name (Last, First, Middle Initial) Carlos Mohamed  Mailing Address 5408 N. Cynthia  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For: Primary General Other (specify) ▼  | C Occupation physician Aggregate | Zip Code<br>78504                   | Transaction ID: SA11A1.6388  Amount of Each Receipt this Period  250.00  contribution |

| SCHEDULE A (FEC Form 3X) |  |  | Use separate schedule(s)          | FOR LINE NUMBER: PAGE 78 / 123          |  |  |  |
|--------------------------|--|--|-----------------------------------|---|--|--|--|
| ITEMIZED RECEIPTS        |  |  | or each category of the           | (check only one)                        |  |  |  |
|                          |  |  | Detailed Summary Page             | X   11a   11b   11c   12   15   16   17 |  |  |  |
| Δr                       | y information copied from such Reports and Si              | tatements may                                | y not he sold or used by any ners |   |  |  |  |
| or                       | for commercial purposes, other than using the              | o solicit contributions from such committee. |                                   |   |  |  |  |
| $\setminus$              | NAME OF COMMITTEE (In Full)                                |  |                                   |   |  |  |  |
|                          | BORDER HEALTH FEDERAL PAC                                  |  |                                   |   |  |  |  |
| A.                       | Full Name (Last, First, Middle Initial)<br>Carlos Mohamed  |  |                                   | Date of Receipt                         |  |  |  |
|                          | Mailing Address 5408 N. Cynthia                            |  |                                   | 05 11 7 2007                            |  |  |  |
|                          | City   | State  | Zip Code                          | Transaction ID: SA11A1.6510             |  |  |  |
|                          | mcallen  | TX   | 78504                             | Amount of Each Receipt this Period      |  |  |  |
|                          | FEC ID number of contributing federal political committee. | C  |                                   | 250.00                                  |  |  |  |
|                          | Name of Employer selfemployed                              | Occupation physician                         |                                   | contribution                            |  |  |  |
|                          | Receipt For:   |  | Year-to-Date ▼                    |   |  |  |  |
|                          | Primary General  |  | 1250.00                           | 7                                       |  |  |  |
|                          | Other (specify) ▼  | 0 0  | 1250.00                           |   |  |  |  |
| В.                       | Full Name (Last, First, Middle Initial)<br>Carlos Mohamed  |  |                                   | Date of Receipt                         |  |  |  |
|                          | Mailing Address 5408 N. Cynthia                            |  |                                   | 06 15 2007                              |  |  |  |
|                          | City   | State  | Zip Code                          | Transaction ID: SA11A1.6639             |  |  |  |
|                          | mcallen  | TX   | 78504                             | Amount of Each Receipt this Period      |  |  |  |
|                          | FEC ID number of contributing federal political committee. | C  |                                   | 250.00                                  |  |  |  |
|                          | Name of Employer selfemployed                              | Occupation physician                         |                                   | contribution                            |  |  |  |
|                          | Receipt For:   |  | e Year-to-Date ▼                  |   |  |  |  |
|                          | Primary General  |  | 1500.00                           | 1                                       |  |  |  |
|                          | Other (specify) ▼  | 0 0  | 1500.00                           |   |  |  |  |
| C.                       | Full Name (Last, First, Middle Initial) Carlos Morales     |  |                                   | Date of Receipt                         |  |  |  |
|                          | Mailing Address 3325 Kent Lane                             |  |                                   | 04 12 2007                              |  |  |  |
|                          | City   | State  | Zip Code                          | Transaction ID: SA11A1.6389             |  |  |  |
|                          | mcallen  | TX   | 78503                             | Amount of Each Receipt this Period      |  |  |  |
| coltomployed             |  | C  |                                   | 250.00                                  |  |  |  |
|                          |  | Occupation physician                         |                                   | contribution                            |  |  |  |
|                          |  |  | e Year-to-Date ▼                  |   |  |  |  |
|                          | Primary General  |  | 1000.00                           | 7                                       |  |  |  |
|                          | Other (specify) ▼  |  | 1000.00                           |   |  |  |  |
| s                        | UBTOTAL of Receipts This Page (optional)                   |  |                                   | 750.00                                  |  |  |  |
| $\vdash$                 | ,  |  | •                                 |   |  |  |  |
| T                        | OTAL This Period (last page this line number               | only)  |                                   |   |  |  |  |

## S

| SCHEDULE A (FEC Form 3X) |   |  | FOR LINE NUMBER: PAGE 79 / 123   |   |        |   |                |                  |       |         |          |           |
|--------------------------|---|--|--|---|--------|---|----------------|------------------|-------|---------|----------|-----------|
| ITEMIZED RECEIPTS        |   |  | (check only one)   |   |        |   |                |                  |       |         |          |           |
| "                        | EMIZED RECEIP 13  |  | or each category of the<br>Detailed Summary Page                           | X   11a   11b   11c   12   15   16   17   18   19   19   19   19   19   19   19 |        |   |                |                  | _     |         |          |           |
| _                        | .,, ., ., ., ., ., ., ., ., ., ., ., .,   |  |  | 13  |        | 14  | <u></u>        | 15               |       | 16      | 上        | 17        |
| or                       | ny information copied from such Reports and St<br>for commercial purposes, other than using the | atements may<br>name and add                     | r not be sold or used by any person<br>dress of any political committee to | solicit cont  | ributi | e of so<br>ons fro                          | on s           | ng cor<br>uch co | omr   | mittee. | <u> </u> |           |
|                          | NAME OF COMMITTEE (In Full)   |  |  |   |        |   |                |                  |       |         |          |           |
|                          | BORDER HEALTH FEDERAL PAC   |  |  |   |        |   |                |                  |       |         |          |           |
| A.                       | Full Name (Last, First, Middle Initial) Carlos Morales  |  |  | Date  | of Re  | eceipt                                      |                |                  |       |         |          |           |
|                          | Mailing Address 3325 Kent Lane  |  |  | м<br>0 5  | M /    |   | D<br>1         | / Y              |       | 200     |          |           |
|                          | City  | State  | Zip Code   | Trans   | actio  | n ID:                                       | SA             | 11A1             | .65   | 511     |          |           |
|                          | mcallen   | TX   | 78503  | Amou  | ınt of | Each  | Rec            | eipt th          | nis F | Period  |          |           |
|                          | FEC ID number of contributing federal political committee.                                      | C  |  |   |        |   |                |                  |       | 250.0   | )0       |           |
|                          | Name of Employer selfemployed   | Occupation physician                             |  | contril   | outic  | n   |                |                  |       |         |          |           |
|                          | Receipt For:  |  | Year-to-Date ▼   |   |        |   |                |                  |       |         |          |           |
|                          | Primary General   |  | 1250.00  | 1   |        |   |                |                  |       |         |          |           |
|                          | Other (specify) ▼   | 0 0  | 1230.00  | 4   |        |   |                |                  |       |         |          |           |
| В.                       | Full Name (Last, First, Middle Initial)<br>Carlos Morales                                       |  |  | Date  | of Re  | eceipt                                      |                |                  |       |         |          |           |
|                          | Mailing Address 3325 Kent Lane  |  |  |   |        | 0 6 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |                |                  |       |         |          |           |
|                          | City  | Transaction ID: SA11A1.6640                      |  |   |        |   |                |                  |       |         |          |           |
|                          | mcallen   | TX   | 78503  | Amou  | ınt of | Each  | Rec            | eipt th          | nis F | Period  |          |           |
|                          | FEC ID number of contributing federal political committee.                                      | C  |  |   |        |   |                |                  |       | 250.0   | )0       |           |
|                          | Name of Employer selfemployed   | Occupation<br>physician                          |  | contril   | outic  | n   |                |                  |       |         |          |           |
|                          | Receipt For:  |  | Year-to-Date ▼   |   |        |   |                |                  |       |         |          |           |
|                          | Primary General   |  | 1500.00  | 1   |        |   |                |                  |       |         |          |           |
|                          | Other (specify)   | 0 0  | 1500.00  | 4   |        |   |                |                  |       |         |          |           |
| <u> </u>                 | Full Name (Last, First, Middle Initial)<br>Leonel Moreno  |  |  | Date  | of Re  | eceipt                                      |                |                  |       |         |          |           |
|                          | Mailing Address 1608 Woods Drive  |  |  | M 0 4   | M /    | D 1   | <sup>D</sup> 2 | / Y              |       | 200     |          |           |
|                          | City  | State  | Zip Code   | Trans   | actio  | n ID:                                       | SA             | 11A1             | .63   | 390     |          |           |
|                          | mission   | TX   | 78572  | Amou  | ınt of | Each  | Rec            | eipt th          | nis F | Period  |          |           |
|                          | FEC ID number of contributing federal political committee.                                      | C  |  | contril   |        |   |                |                  |       | 163.5   | 58       |           |
|                          | Name of Employer selfemployed   | ame of Employer Occupation elfemployed physician |  |   |        |   |                |                  |       |         |          |           |
|                          | Receipt For:  |  | Year-to-Date ▼   |   |        |   |                |                  |       |         |          |           |
|                          | Primary General   |  | 000 F7   | 1   |        |   |                |                  |       |         |          |           |
|                          | Other (specify) ▼   |  | 603.57   | ]   |        |   |                |                  |       |         |          |           |
|                          |   |  |  |   |        |   |                |                  | _     |         |          |           |
| ١.                       |   |  |  |   |        |   |                |                  | •     | 663.5   | 18       |           |
| Ls                       | SUBTOTAL of Receipts This Page (optional)   |  |  |   | -      | -   | -              |                  | _     |         |          | $\exists$ |

| SCHEDULE A (FEC Form 3X) |  |                         | lloc concrete cobodulo(c)           | FOR LINE NUMBER: PAGE 80 / 123                              |
|--------------------------|--|-------------------------|-------------------------------------|---|
| ITEMIZED RECEIPTS        |  | or each category of the | (check only one)                    |   |
| ••                       | LIMIZED RECEIL 13  |                         | Detailed Summary Page               | X   11a   11b   11c   12   12   17   17   17   17   17   17 |
| Δ.                       | by information assign from such Baserta and Sta  | stomente mes            | , not be cold or used by any perce  | 13 14 15 16 17  |
| or                       | ny information copied from such Reports and Sta<br>for commercial purposes, other than using the n | iame and add            | dress of any political committee to | solicit contributions from such committee.                  |
|                          | NAME OF COMMITTEE (In Full)  |                         |                                     |   |
| $  \rangle$              | BORDER HEALTH FEDERAL PAC  |                         |                                     |   |
| $\angle$                 |  |                         |                                     |   |
|                          | Full Name (Last, First, Middle Initial)  |                         |                                     | 5. (5. ).   |
| Α.                       | Leonel Moreno  |                         |                                     | Date of Receipt   |
|                          | Mailing Address 1608 Woods Drive   |                         |                                     | 05 11 2007  |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6512                                 |
|                          | mission  | TX                      | 78572                               | Amount of Each Receipt this Period                          |
|                          |  |                         | 70072                               |   |
|                          | FEC ID number of contributing federal political committee.   | C                       |                                     | 172.61  |
|                          |  |                         |                                     | contribution  |
|                          | Name of Employer selfemployed  | Occupation              |                                     | Continuation  |
|                          |  | physiciar               |                                     |   |
|                          | Receipt For:   | Aggregate               | e Year-to-Date ▼                    |   |
|                          | Primary General Other (specify) ▼  | ' '                     | 776.18                              |   |
|                          | Cirici (specify)   |                         |                                     | 1   |
| _                        | Full Name (Last, First, Middle Initial)  |                         |                                     | <u> </u>  |
| В.                       | Leonel Moreno  |                         |                                     | Date of Receipt   |
|                          | Mailing Address 1608 Woods Drive   |                         |                                     | M M / D D / Y Y Y Y   |
|                          |  |                         |                                     | 06 15 2007  |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6641                                 |
|                          | mission  | <u>TX</u>               | 78572                               | Amount of Each Receipt this Period                          |
|                          | FEC ID number of contributing  | C                       |                                     | 139.77  |
|                          | federal political committee.   | 0                       |                                     |   |
|                          | Name of Employer   | Occupation              | n                                   | contribution  |
|                          | selfemployed   | physiciar               |                                     |   |
|                          | Receipt For:   | Aggregate               | e Year-to-Date ▼                    |   |
|                          | Primary General  |                         | 015.05                              | 1   |
|                          | Other (specify) ▼  |                         | 915.95                              |   |
| _                        |  |                         |                                     |   |
| C.                       | Full Name (Last, First, Middle Initial) Gregoris Nunez   |                         |                                     | Date of Receipt   |
| <b>J</b> .               | Mailing Address 1604 East Eight  |                         |                                     | M M / D D / Y Y Y Y   |
|                          | suite b  |                         |                                     | 04 12 2007  |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6391                                 |
|                          | weslaco  | TX                      | 78596                               | Amount of Each Receipt this Period                          |
|                          | FEC ID number of contributing  |                         |                                     | 146.60  |
|                          | federal political committee.   | C                       |                                     | 140.00  |
| colfomployed             |  | Occupation              | n                                   | contribution  |
|                          |  | physiciar               |                                     |   |
|                          | Receipt For:   |                         | Year-to-Date ▼                      |   |
|                          | Primary General  | 33 3                    |                                     | 1   |
|                          | Other (specify) ▼  | L                       | 540.90                              |   |
|                          |  |                         |                                     |   |
|                          |  |                         |                                     | 450.00  |
| s                        | UBTOTAL of Receipts This Page (optional)   |                         |                                     | 458.98  |
|                          |  |                         |                                     |   |
| T                        | OTAL This Period (last page this line number of  | nly)                    | <b>)</b>                            |   |

| SC                | HEDULE A (FEC Form 3X)   |                              |   | FOR LINE NUMBER: PAGE 81 / 123  |  |  |  |  |
|-------------------|--|------------------------------|---|---|--|--|--|--|
| ITEMIZED RECEIPTS |  |                              | Use separate schedule(s)<br>or each category of the                     | (check only one)  |  |  |  |  |
| 111               | EMIZED RECEIPTS  |                              | Detailed Summary Page   | X 11a 11b 11c 12  |  |  |  |  |
|                   |  |                              |   | 13 14 15 16 17  |  |  |  |  |
| Any<br>or f       | r information copied from such Reports and Sta<br>or commercial purposes, other than using the n | itements may<br>lame and add | not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |  |  |  |  |
| $\overline{\ }$   | NAME OF COMMITTEE (In Full)  |                              |   |   |  |  |  |  |
| $\rangle$         | BORDER HEALTH FEDERAL PAC  |                              |   |   |  |  |  |  |
| ٩                 | Full Name (Last, First, Middle Initial)<br>Gregoris Nunez  |                              |   | Date of Receipt   |  |  |  |  |
|                   | Mailing Address 1604 East Eight suite b  |                              |   | 05 11 7 2007  |  |  |  |  |
|                   | City   | State                        | Zip Code  | Transaction ID: SA11A1.6513   |  |  |  |  |
| •                 | weslaco  | TX                           | 78596   | Amount of Each Receipt this Period  |  |  |  |  |
|                   | FEC ID number of contributing federal political committee.                                       | C                            |   | 154.69  |  |  |  |  |
|                   | Name of Employer<br>selfemployed   | Occupation physician         |   | contribution  |  |  |  |  |
|                   | Receipt For:   | <u> </u>                     | Year-to-Date ▼  |   |  |  |  |  |
|                   | Primary General Other (specify) ▼  |                              | 695.59  |   |  |  |  |  |
|                   | Full Name (Last, First, Middle Initial)<br>Gregoris Nunez  |                              |   | Date of Receipt   |  |  |  |  |
|                   | Mailing Address 1604 East Eight suite b  |                              |   | 0 6 1 5 2 0 0 7   |  |  |  |  |
|                   | City   | Transaction ID: SA11A1.6642  |   |   |  |  |  |  |
|                   | weslaco  | TX                           | 78596   | Amount of Each Receipt this Period  |  |  |  |  |
|                   | FEC ID number of contributing federal political committee.                                       | C                            |   | 125.26  |  |  |  |  |
|                   | Name of Employer<br>selfemployed   | Occupation physician         |   | contribution  |  |  |  |  |
|                   | Receipt For:   | Aggregate                    | Year-to-Date ▼  |   |  |  |  |  |
|                   | Primary General Other (specify) ▼  | 0 0                          | 820.85  |   |  |  |  |  |
| _                 | Full Name (Last, First, Middle Initial)<br>Juan Ortiz  |                              |   | Date of Receipt   |  |  |  |  |
|                   | Mailing Address 4501 N. Cynthia  |                              |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |  |  |  |  |
|                   | City   | State                        | Zip Code  | Transaction ID: SA11A1.6392   |  |  |  |  |
|                   | mcallen  | TX                           | 78504   | Amount of Each Receipt this Period  |  |  |  |  |
|                   | FEC ID number of contributing federal political committee.                                       | C                            |   | 250.00  |  |  |  |  |
|                   | Name of Employer<br>selfemployed   | Occupation physician         |   | contribution  |  |  |  |  |
|                   | Receipt For:   | <u> </u>                     | Year-to-Date ▼  | 7   |  |  |  |  |
|                   | Primary General Other (specify) ▼  | 0 0                          | 1000.00   |   |  |  |  |  |
| SL                | IBTOTAL of Receipts This Page (optional)   |                              |   | 529.95  |  |  |  |  |
|                   |  |                              | <u>`</u>  |   |  |  |  |  |
| TC                | OTAL This Period (last page this line number or  | nly)                         | <b>)</b>  |   |  |  |  |  |

| SCHEDULE A (FEC Form 3X) |  |                                | Use separate schedule(s)                      | FOR LINE NUMBER: PAGE 82 / 123                                 |  |  |  |  |
|--------------------------|--|--------------------------------|---|--|--|--|--|--|
|                          | EMIZED RECEIPTS  |                                | or each category of the Detailed Summary Page | (check only one)  X 11a 11b 11c 12  13 14 15 16 17             |  |  |  |  |
| Ar                       | ny information copied from such Reports and S<br>for commercial purposes, other than using the   | tatements may                  | y not be sold or used by any perso            | on for the purpose of soliciting contributions                 |  |  |  |  |
| Š                        | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  | Traine and doc                 | areas or any political committee to           | SOLOR CONTRIBUTIONS WORLD SOUTHWINECE.                         |  |  |  |  |
| Α.                       | Full Name (Last, First, Middle Initial) Juan Ortiz  Mailing Address 4501 N. Cynthia  City mcallen  | State<br>TX                    | Zip Code<br>78504                             | Date of Receipt    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |  |  |  |  |
|                          | FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General Other (specify) ▼ | Occupation physician Aggregate |   | 250.00 contribution  |  |  |  |  |
| В.                       | Mailing Address 4501 N. Cynthia  |                                |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |  |  |  |  |
|                          | City<br>mcallen  | State<br>TX                    | Zip Code                                      | Transaction ID: SA11A1.6643                                    |  |  |  |  |
|                          | FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:  Primary  Other (specify)          | Occupation physiciar           |   | Amount of Each Receipt this Period  250.00  contribution       |  |  |  |  |
| C.                       | Full Name (Last, First, Middle Initial) Armando Osio Mailing Address 600 Tulip City  | State                          | Zip Code                                      | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |  |  |  |  |
|                          | mcallen  | TX                             | 78504   | Amount of Each Receipt this Period                             |  |  |  |  |
|                          | FEC ID number of contributing federal political committee.   | C                              |   | 250.00   |  |  |  |  |
|                          | Name of Employer selfemployed  Receipt For:  Primary General Other (specify) ▼   | Occupation physician Aggregate |   | contribution   |  |  |  |  |
| s                        | UBTOTAL of Receipts This Page (optional)   |                                |   | 750.00   |  |  |  |  |
| т                        | OTAL This Period (last page this line number   | only)                          |   |  |  |  |  |  |

| SCHEDULE A (FEC Form 3X)   |   |                              | Use separate schedule(s)   | FOR LINE NUMBER: PAGE 83 / 123   |  |  |  |  |
|--|---|------------------------------|--|--|--|--|--|--|
|  | EMIZED RECEIPTS   |                              | or each category of the  | (check only one)   |  |  |  |  |
| TI LIVIIZED TIEGEII TO   |   |                              | Detailed Summary Page  | X 11a 11b 11c 12   |  |  |  |  |
| A distance in the control of the con |   |                              |  | 13 14 15 16 17   |  |  |  |  |
| or   | y information copied from such Reports and St for commercial purposes, other than using the | atements may<br>name and ado | r not be sold or used by any pers<br>dress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |  |  |  |  |
| $\setminus$  | NAME OF COMMITTEE (In Full)   |                              |  |  |  |  |  |  |
|  | BORDER HEALTH FEDERAL PAC   |                              |  |  |  |  |  |  |
| A.   | Full Name (Last, First, Middle Initial)<br>Armando Osio                                     |                              |  | Date of Receipt  |  |  |  |  |
|  | Mailing Address 600 Tulip   |                              |  | 05 11 2007   |  |  |  |  |
|  | City  | State                        | Zip Code   | Transaction ID: SA11A1.6515  |  |  |  |  |
|  | mcallen   | TX                           | 78504  | Amount of Each Receipt this Period   |  |  |  |  |
|  | FEC ID number of contributing federal political committee.                                  | С                            |  | 250.00   |  |  |  |  |
|  | Name of Employer selfemployed   | Occupation physician         |  | contribution   |  |  |  |  |
|  | Receipt For:  |                              | Year-to-Date ▼   |  |  |  |  |  |
|  | Primary General   |                              | 1250.00  | 7  |  |  |  |  |
|  | Other (specify) ▼   | 0 0                          | 1230.00  |  |  |  |  |  |
| В.   | Full Name (Last, First, Middle Initial)<br>Armando Osio                                     |                              |  | Date of Receipt  |  |  |  |  |
|  | Mailing Address 600 Tulip   | 06 15 2007                   |  |  |  |  |  |  |
|  | City  | State                        | Zip Code   | Transaction ID: SA11A1.6644  |  |  |  |  |
|  | mcallen   | TX                           | 78504  | Amount of Each Receipt this Period   |  |  |  |  |
|  | FEC ID number of contributing federal political committee.                                  | C                            |  | 250.00   |  |  |  |  |
|  | Name of Employer selfemployed   | Occupation physician         |  | contribution   |  |  |  |  |
|  | Receipt For:  | Aggregate                    | e Year-to-Date ▼   |  |  |  |  |  |
|  | Primary General   |                              | 1500.00  | 1  |  |  |  |  |
|  | Other (specify)   | 0 0                          | 1300.00  |  |  |  |  |  |
| C.   | Full Name (Last, First, Middle Initial)<br>Fernando Otero                                   |                              |  | Date of Receipt  |  |  |  |  |
|  | Mailing Address 121 E. Quamasia #148  |                              |  | 04 / 12 / Y Y Y Y Y Y Y  |  |  |  |  |
|  | City  | State                        | Zip Code   | Transaction ID: SA11A1.6394  |  |  |  |  |
|  | mcallen   | TX                           | 78501  | Amount of Each Receipt this Period   |  |  |  |  |
|  | FEC ID number of contributing federal political committee.                                  | C                            |  | 250.00   |  |  |  |  |
|  | Name of Employer selfemployed   | Occupation physician         |  | contribution   |  |  |  |  |
|  | Receipt For:  |                              | e Year-to-Date ▼   |  |  |  |  |  |
|  | Primary General Other (specify) ▼   |                              | 1000.00  |  |  |  |  |  |
| Г  |   |                              |  | 750.00   |  |  |  |  |
| Ls   | UBTOTAL of Receipts This Page (optional)  |                              |  | 700.00   |  |  |  |  |
| _  | OTAL This Period (last page this line number of   | only)                        | I  |  |  |  |  |  |

| SCHEDULE A (FEC Form 3X) |   |                             |   | FOR LINE NUMBER: PAGE 84 / 123                 |  |  |  |
|--------------------------|---|-----------------------------|---|--|--|--|--|
| -                        |   |                             | Use separate schedule(s)<br>or each category of the | (check only one)                               |  |  |  |
| ITEMIZED RECEIPTS        |   |                             | Detailed Summary Page                               | X 11a 11b 11c 12                               |  |  |  |
|                          |   |                             |   | 13 14 15 16 17                                 |  |  |  |
| Ar                       | y information copied from such Reports and St for commercial purposes, other than using the | atements may                | not be sold or used by any person                   | on for the purpose of soliciting contributions |  |  |  |
| or                       |   | name and add                | aress or any political committee to                 | o solicit contributions from such committee.   |  |  |  |
|                          | NAME OF COMMITTEE (In Full)   |                             |   |  |  |  |  |
| 1/                       | BORDER HEALTH FEDERAL PAC   |                             |   |  |  |  |  |
|                          | Full Name (Last, First, Middle Initial)   |                             |   |  |  |  |  |
| A.                       | Fernando Otero  |                             |   | Date of Receipt                                |  |  |  |
|                          | Mailing Address 121 E. Quamasia   |                             |   | M M / D D / Y Y Y Y                            |  |  |  |
|                          | #148  |                             |   | 05 11 2007                                     |  |  |  |
|                          | City  | State                       | Zip Code  | Transaction ID: SA11A1.6516                    |  |  |  |
|                          | mcallen   | TX                          | 78501   | Amount of Each Receipt this Period             |  |  |  |
|                          | FEC ID number of contributing   | С                           |   | 250.00   |  |  |  |
|                          | federal political committee.  |                             |   |  |  |  |  |
|                          | Name of Employer selfemployed   | Occupation                  | า   | contribution                                   |  |  |  |
|                          | seirempioyea  | physician                   | 1   |  |  |  |  |
|                          | Receipt For:  | Aggregate                   | Year-to-Date ▼                                      |  |  |  |  |
|                          | Primary General   |                             | 1250.00   |  |  |  |  |
|                          | Other (specify)   |                             | 1200.00   |  |  |  |  |
|                          | Full Name (Least First Middle Letter)   |                             |   |  |  |  |  |
| В.                       | Full Name (Last, First, Middle Initial)<br>Fernando Otero                                   |                             |   | Date of Receipt                                |  |  |  |
|                          | Mailing Address 121 E. Quamasia   |                             |   | M M / D D / Y Y Y Y                            |  |  |  |
|                          | #148  |                             | Zip Code  | 06 15 2007                                     |  |  |  |
|                          | City  | Transaction ID: SA11A1.6645 |   |  |  |  |  |
|                          | mcallen   | TX                          | 78501   | Amount of Each Receipt this Period             |  |  |  |
|                          | FEC ID number of contributing   | С                           |   | 250.00   |  |  |  |
|                          | federal political committee.  |                             |   |  |  |  |  |
|                          | Name of Employer  | Occupation                  | <u> </u>  | contribution                                   |  |  |  |
|                          | selfemployed  | physician                   |   |  |  |  |  |
|                          | Receipt For:  | Aggregate                   | Year-to-Date ▼                                      |  |  |  |  |
|                          | Primary General   |                             | 1500.00   | 1  |  |  |  |
|                          | Other (specify)   |                             | 1500.00   |  |  |  |  |
|                          |   |                             |   |  |  |  |  |
| C.                       | Full Name (Last, First, Middle Initial)<br>Kip Owen   |                             |   | Date of Receipt                                |  |  |  |
|                          | Mailing Address 2305 Red River  |                             |   | M M / D D / Y Y Y Y                            |  |  |  |
|                          |   |                             |   | 04 12 2007                                     |  |  |  |
|                          | City  | State                       | Zip Code  | Transaction ID: SA11A1.6395                    |  |  |  |
|                          | mcallen   | TX                          | 78572   | Amount of Each Receipt this Period             |  |  |  |
|                          | FEC ID number of contributing   | С                           |   | 250.00   |  |  |  |
|                          | federal political committee.  |                             |   | 250.00   |  |  |  |
|                          | Name of Employer  | Occupation                  | า   | contribution                                   |  |  |  |
|                          | selfemployed  |                             | 1   |  |  |  |  |
|                          | Receipt For:  |                             | Year-to-Date ▼                                      |  |  |  |  |
|                          | Primary General   |                             | 1000.00   | 1  |  |  |  |
|                          | Other (specify)   |                             | 1000.00   |  |  |  |  |
| _                        |   |                             |   |  |  |  |  |
|                          |   |                             |   | 750.00   |  |  |  |
| S                        | UBTOTAL of Receipts This Page (optional)  |                             |   | 750.00   |  |  |  |
|                          |   |                             |   |  |  |  |  |

| S           | CHEDULE A (FEC Form 3X)   |                      |   | FOR LINE NUMBER: PAGE 85 / 123                        |
|-------------|---|----------------------|---|---|
| •           |   |                      | Use separate schedule(s)<br>or each category of the | (check only one)                                      |
| П           | EMIZED RECEIPTS   |                      | Detailed Summary Page                               | X 11a 11b 11c 12                                      |
|             |   |                      | , ,   | 13 14 15 16 17  |
| Ar          | ly information copied from such Reports and St<br>for commercial purposes, other than using the | atements may         | not be sold or used by any pers                     | on for the purpose of soliciting contributions        |
| \           | NAME OF COMMITTEE (In Full)   | aric aric acc        | political committee to                              | 5 Solicit Contributions from Such Committee.          |
| $  \rangle$ | BORDER HEALTH FEDERAL PAC   |                      |   |   |
|             | DONDER HEALTH EDERAL FAO  |                      |   |   |
| _           | Full Name (Last, First, Middle Initial)   |                      |   |   |
| Α.          | Kip Owen  |                      |   | Date of Receipt                                       |
|             | Mailing Address 2305 Red River  |                      |   | 05 11 2007  |
|             | City  | State                | Zip Code  | Transaction ID: SA11A1.6517                           |
|             | mcallen   | TX                   | 78572   | Amount of Each Receipt this Period                    |
|             | FEC ID number of contributing   |                      |   |   |
|             | federal political committee.  | C                    |   | 250.00  |
|             | Name of Employer  | Occupation           | 2   | contribution  |
|             | Name of Employer selfemployed   | physician            |   |   |
|             | Receipt For:  | 1                    | Year-to-Date ▼                                      |   |
|             | Primary General   |                      | 1050.00   | 7   |
|             | Other (specify)   | 0 0                  | 1250.00   |   |
|             |   |                      |   |   |
| В.          | Full Name (Last, First, Middle Initial)<br>Kip Owen   |                      |   | Date of Receipt                                       |
| ٠.          | Mailing Address 2305 Red River  |                      |   | M M / D D / Y Y Y Y                                   |
|             |   |                      |   | 06 15 2007  |
|             | City  | State                | Zip Code  | Transaction ID: SA11A1.6646                           |
|             | mcallen   | TX                   | 78572   | Amount of Each Receipt this Period                    |
|             | FEC ID number of contributing   | С                    |   | 250.00  |
|             | federal political committee.  |                      |   |   |
|             | Name of Employer selfemployed   | Occupation           | า   | contribution  |
|             | sellempioyed  | physician            | 1   |   |
|             | Receipt For:  | Aggregate            | e Year-to-Date ▼                                    |   |
|             | Primary General Other (specify)   | , ,                  | 1500.00   |   |
|             | Other (specify)   | 0 0                  | 0 0 0 0 0 0   | <u> </u>  |
| _           | Full Name (Last, First, Middle Initial)   |                      |   |   |
| C.          | Prakash Palimar   |                      |   | Date of Receipt                                       |
|             | Mailing Address 121 Canary  |                      |   | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ |
|             | City  | State                | Zip Code  | Transaction ID: SA11A1.6396                           |
|             | mcallen   | TX                   | 78504   | Amount of Each Receipt this Period                    |
|             | FEC ID number of contributing   |                      | 70001   |   |
|             | federal political committee.  |                      |   | 250.00  |
|             | Name of Francisco   | 10                   |   | contribution  |
|             | Name of Employer selfemployed   | Occupation physician |   |   |
|             | priysici  |                      | Year-to-Date ▼                                      | $\dashv$  |
|             |   |                      |   | 7   |
|             | Other (specify)   |                      | 1000.00   |   |
| _           |   |                      |   |   |
|             |   | 750.00               |   |   |
| S           | UBTOTAL of Receipts This Page (optional)  |                      |   | 730.00  |
| _           | OTAL This Davis delications at the line asset to a  | unlu ()              |   |   |
| 1 1         | OTAL This Period (last page this line number of   | ип <b>у</b> )        |   |   |

## S

|             | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  |                            | Use separate schedule(s) or each category of the Detailed Summary Page  | FOR LINE NUMBER: PAGE 86 / 123 (check only one)  X 11a 11b 11c 12                        |
|-------------|--|----------------------------|---|--|
|             |  |                            | , ,   | 13 14 15 16 17   |
| Ar          | ny information copied from such Reports and Stat<br>for commercial purposes, other than using the na | tements may<br>ame and add | not be sold or used by any perso<br>dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\setminus$ | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  |                            |   |  |
| Α.          | Full Name (Last, First, Middle Initial) Prakash Palimar  Mailing Address 121 Canary  City            | State                      | Zip Code  | Date of Receipt    M   |
|             | mcallen  | TX                         | 78504   | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing federal political committee.   | C                          |   | 250.00   |
|             | Name of Employer selfemployed  | Occupation physiciar       | 1   | contribution   |
|             | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                  | e Year-to-Date ▼<br>1250.00   |  |
| В.          | Full Name (Last, First, Middle Initial) Prakash Palimar  |                            |   | Date of Receipt  |
|             | Mailing Address 121 Canary   |                            |   | 0 6 1 5 2 0 0 7  |
|             | City   | State                      | Zip Code  | Transaction ID: SA11A1.6647  |
|             | mcallen  | TX                         | 78504   | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing federal political committee.   | C                          |   | 250.00   |
|             | Name of Employer selfemployed  | Occupation physiciar       | 1   | contribution   |
|             | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                  | e Year-to-Date ▼<br>1500.00   |  |
| C.          | Full Name (Last, First, Middle Initial) Umesh Pathak   |                            |   | Date of Receipt  |
|             | Mailing Address 2004 Alexander Drive   |                            |   | 04 12 2007   |
|             | City   | State                      | Zip Code  | Transaction ID: SA11A1.6397  |
|             | weslaco  | TX                         | 78596   | Amount of Each Receipt this Period   |
|             | FEC ID number of contributing federal political committee.   | C                          |   | 146.60 contribution  |
|             | Name of Employer selfemployed  | Occupation physician       |   |  |
|             | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                  | 540.90  |  |
| s           | UBTOTAL of Receipts This Page (optional)   |                            |   | 646.60   |
| Т           | OTAL This Period (last page this line number or  | ıly)                       |   |  |

|             | CHEDULE A (FEC Form 3X)   |                              | Use separate schedule(s) or each category of the                    | (check only one)   |
|-------------|---|------------------------------|---|--|
|             | EMIZED RECEIPTS   |                              | Detailed Summary Page   | X 11a 11b 11c 12<br>13 14 15 16 17   |
| Ar<br>or    | ny information copied from such Reports and St<br>for commercial purposes, other than using the | atements may<br>name and add | not be sold or used by any persolates of any political committee to | on for the purpose of soliciting contributions oscilcit contributions from such committee. |
| $\setminus$ | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |                              |   |  |
| Α.          | Full Name (Last, First, Middle Initial)<br>Umesh Pathak   |                              |   | Date of Receipt  |
|             | Mailing Address 2004 Alexander Drive  |                              |   | 05 11 2007   |
|             | City<br>weslaco   | State<br>TX                  | Zip Code<br>78596   | Transaction ID: SA11A1.6519  Amount of Each Receipt this Period                            |
|             | FEC ID number of contributing federal political committee.                                      | C                            | 7 0000  | 154.69   |
|             | Name of Employer selfemployed   | Occupation physiciar         |   | contribution   |
|             | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                    | e Year-to-Date ▼<br>695.59  |  |
| В.          | Full Name (Last, First, Middle Initial) Umesh Pathak Mailing Address 2004 Alexander Drive       |                              |   | Date of Receipt  |
|             | City  | 06 15 2007                   |   |  |
|             | weslaco   | State<br>TX                  | Zip Code<br>78596   | Transaction ID: SA11A1.6648  Amount of Each Receipt this Period                            |
|             | FEC ID number of contributing federal political committee.                                      | C                            | 70000   | 125.26   |
|             | Name of Employer selfemployed   | Occupation                   |   | contribution   |
|             | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                    | e Year-to-Date ▼ 820.85   |  |
| <u> </u>    | Full Name (Last, First, Middle Initial) Ruben Pechero   |                              |   | Date of Receipt  |
|             | Mailing Address 5508 N. Cynthia   |                              |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|             | City<br>McAllen   | State<br>TX                  | Zip Code<br>78502   | Transaction ID: SA11A1.6398  Amount of Each Receipt this Period                            |
|             | FEC ID number of contributing federal political committee.                                      | C                            | 70002   | 250.00   |
|             | Name of Employer<br>Self-Employed   | Occupation<br>Physician      |   | contribution   |
|             | Receipt For:  Primary General  Other (specify) ▼  |                              | Year-to-Date ▼ 750.00   |  |
| s           | UBTOTAL of Receipts This Page (optional)  |                              |   | 529.95   |
| Н           | OTAL This Period (last nage this line number of   |                              |   |  |

| SCHEDULE A (FEC Form 3X) |   |  | Use separate schedule(s)  | FOR LINE NUMBER: PAGE 88 / 123  |  |  |
|--------------------------|---|--|---|---|--|--|
| ITEMIZED RECEIPTS        |   | or each category of the  Detailed Summary Page | (check only one)  X 11a 11b 11c 12                                      |   |  |  |
| _                        |   |  |   | 13 14 15 16 17  |  |  |
| Ar<br>or                 | ny information copied from such Reports and St<br>for commercial purposes, other than using the | atements may<br>name and add                   | not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |  |  |
| $\setminus$              | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |  |   |   |  |  |
| Α.                       | Full Name (Last, First, Middle Initial) Ruben Pechero   |  |   | Date of Receipt   |  |  |
|                          | Mailing Address 5508 N. Cynthia   | Otata  | 7'n Oada  | 05 11 2007  |  |  |
|                          | City McAllen  | State<br>TX                                    | Zip Code<br>78502   | Transaction ID: SA11A1.6520  Amount of Each Receipt this Period                           |  |  |
|                          | FEC ID number of contributing federal political committee.                                      | C  |   | 250.00  |  |  |
|                          | Name of Employer<br>Self-Employed   | Occupation Physician                           |   | contribution  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                                      | e Year-to-Date ▼<br>1000.00   |   |  |  |
| В.                       | Full Name (Last, First, Middle Initial)<br>Ruben Pechero  |  |   | Date of Receipt   |  |  |
|                          | Mailing Address 5508 N. Cynthia   |  |   | 06 15 7 2007  |  |  |
|                          | City  | State  | Zip Code  | Transaction ID: SA11A1.6649   |  |  |
|                          | McAllen   | TX   | 78502   | Amount of Each Receipt this Period  |  |  |
|                          | FEC ID number of contributing federal political committee.                                      | C  |   | 250.00 contribution   |  |  |
|                          | Name of Employer<br>Self-Employed   | Occupation Physician                           |   | Contribution  |  |  |
|                          | Receipt For:  | Aggregate                                      | e Year-to-Date ▼  |   |  |  |
|                          | Primary General Other (specify) ▼   | 0 0  | 1250.00   |   |  |  |
| <u>С</u> .               | Full Name (Last, First, Middle Initial)<br>Jose Pena  |  |   | Date of Receipt   |  |  |
|                          | Mailing Address 100 Bluebird  |  |   | 04 12 2007  |  |  |
|                          | City  | State  | Zip Code  | Transaction ID: SA11A1.6399   |  |  |
|                          | mcallen   | TX   | 78504   | Amount of Each Receipt this Period  |  |  |
|                          | FEC ID number of contributing federal political committee.                                      | С  |   | 250.00 contribution   |  |  |
|                          | Name of Employer Selfemployed Occupation physicia   |  | 1   | Continuation  |  |  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                                      | e Year-to-Date ▼<br>1000.00   |   |  |  |
| s                        | UBTOTAL of Receipts This Page (optional)  |  |   | 750.00  |  |  |
| Т                        | OTAL This Period (last page this line number of   | only)  |   |   |  |  |

| SCH       | SCHEDULE A (FEC Form 3X)                  |              |   | FOR LINE NUMBER: PAGE 89 / 123                        |
|-----------|---|--------------|---|---|
| -         |   |              | Use separate schedule(s)<br>or each category of the | (check only one)                                      |
| HEV       | MIZED RECEIPTS                            |              | Detailed Summary Page                               | X 11a 11b 11c 12                                      |
|           |   |              | Dotailed Carrinary Fage                             | 13 14 15 16 17  |
| Any in    | formation copied from such Reports and St | atements may | not be sold or used by any perso                    | on for the purpose of soliciting contributions        |
| or for o  | commercial purposes, other than using the | name and add | lress of any political committee to                 | solicit contributions from such committee.            |
| 1 \       | ME OF COMMITTEE (In Full)                 |              |   |   |
| BC        | ORDER HEALTH FEDERAL PAC                  |              |   |   |
| Ful       | l Name (Last, First, Middle Initial)      |              |   |   |
|           | se Pena                                   |              |   | Date of Receipt                                       |
| Ма        | iling Address 100 Bluebird                |              |   | 05 11 2007  |
| City      | у   | State        | Zip Code  | Transaction ID: SA11A1.6521                           |
| <u>m</u>  | callen                                    | TX           | 78504   | Amount of Each Receipt this Period                    |
| FF        | C ID number of contributing               |              |   |   |
|           | eral political committee.                 | C            |   | 250.00  |
| Na        | me of Employer<br>femployed               | Occupation   |   | contribution  |
|           | · · ·                                     | physician    |   |   |
| Re        | ceipt For:                                | Aggregate    | Year-to-Date ▼                                      |   |
|           | Primary General                           |              | 1250.00   |   |
|           | Other (specify) ▼                         | 0 0          |   | 1   |
|           | l Name (Last, First, Middle Initial)      |              |   | 2. (2   |
|           | se Pena                                   |              |   | Date of Receipt                                       |
| ivia      | iling Address 100 Bluebird                |              |   | 06 15 2007  |
| Cit       | у   | State        | Zip Code  | Transaction ID: SA11A1.6650                           |
| <u>m</u>  | callen                                    | TX           | 78504   | Amount of Each Receipt this Period                    |
| FE        | C ID number of contributing               |              | 0 0 0 0   | 250.00  |
|           | eral political committee.                 | C            |   | 250.00  |
| Na        | me of Employer                            | Occupation   | า   | contribution  |
| sel       | femployed                                 | physician    |   |   |
| Re        | ceipt For:                                |              | Year-to-Date ▼                                      |   |
|           | Primary General                           |              |   | 1   |
|           | Other (specify) ▼                         |              | 1500.00   |   |
| Ful       | I Name (Last, First, Middle Initial)      |              |   | +   |
|           | an Pena                                   |              |   | Date of Receipt                                       |
| Ма        | Mailing Address 905 S. Huisache Court     |              |   | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ |
| City      | у   | State        | Zip Code  | Transaction ID: SA11A1.6400                           |
| <u>ph</u> | arr                                       | TX           | 78577   | Amount of Each Receipt this Period                    |
| FE        | C ID number of contributing               |              |   | 250.00  |
| fed       | eral political committee.                 | C            |   |   |
| Na        | me of Employer                            | Occupation   | า   | contribution  |
| Sei       | f-employed *                              | private in   |   |   |
| Re        | ceipt For:                                | Aggregate    | Year-to-Date ▼                                      |   |
| _         | Primary General                           |              | 1000.00   | 1   |
|           | Other (specify) ▼                         | 0 0          | 1000.00   | 1   |
|           |   |              |   |   |
|           |   |              |   | 750.00  |
| SUBT      | TOTAL of Receipts This Page (optional)    |              |   | - 100.00  |

| SCHEDULE A (FEC Form 3X) |   | Use separate schedule(s) or each category of the | (check only one)  |   |
|--------------------------|---|--|---|---|
|                          | EMIZED RECEIPTS   |  | Detailed Summary Page   | X 11a 11b 11c 12<br>13 14 15 16 17  |
| Ar<br>or                 | ly information copied from such Reports and State<br>for commercial purposes, other than using the na | ements may<br>me and add                         | not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\setminus$              | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |  |   |   |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Juan Pena  |  |   | Date of Receipt   |
|                          | Mailing Address 905 S. Huisache Court   |  |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
|                          | City  | State<br>TX                                      | Zip Code<br>78577   | Transaction ID: SA11A1.6522  Amount of Each Receipt this Period                           |
|                          | FEC ID number of contributing federal political committee.  |  | 70077   | 250.00  |
|                          | Name of Employer self-employed  | Occupation private in                            |   | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | Aggregate  | Year-to-Date ▼<br>1250.00   |   |
| В.                       | Full Name (Last, First, Middle Initial) Juan Pena Mailing Address 905 S. Huisache Court               |  |   | Date of Receipt   |
|                          |   | 06 15 2007                                       |   |   |
|                          | City State Oharr TX   |  | Zip Code<br>78577   | Transaction ID: SA11A1.6651   |
|                          | pharr FEC ID number of contributing federal political committee.                                      | C  | 76377   | Amount of Each Receipt this Period  250.00  |
|                          | Name of Employer self-employed  | Occupation private in                            |   | contribution  |
|                          | Receipt For:  ☐ Primary ☐ General  Other (specify) ▼  | Aggregate  | e Year-to-Date ▼<br>1500.00   |   |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Ernie Perez   |  |   | Date of Receipt   |
|                          | Mailing Address P.O. Box 5360   |  |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
|                          | City mcallen  | State<br>TX                                      | Zip Code<br>78502   | Transaction ID: SA11A1.6401  Amount of Each Receipt this Period                           |
|                          | FEC ID number of contributing federal political committee.  |  |   | 73.30   |
|                          | Name of Employer self-employed  | Occupation private in                            |   | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼  | pt For: Aggregate Year-to-Date ▼ Primary General |   |   |
| s                        | UBTOTAL of Receipts This Page (optional)  |  |   | 573.30  |
| -                        | OTAL This Period (last page this line number on   | (v)  |   |   |

| SCHEDULE A (FEC Form 3X) |  |   | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 91 / 123                                  |
|--------------------------|--|---|-------------------------------------|---|
| ITEMIZED RECEIPTS        |  | or each category of the Detailed Summary Page | (check only one)  X 11a 11b 11c 12  |   |
| Ar                       | y information copied from such Reports and Sta             | atements may                                  | not be sold or used by any perso    | 13 14 15 16 17 on for the purpose of soliciting contributions   |
| or                       | for commercial purposes, other than using the r            | name and add                                  | dress of any political committee to | solicit contributions from such committee.                      |
|                          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC      |   |                                     |   |
| Α.                       | Full Name (Last, First, Middle Initial) Ernie Perez        |   |                                     | Date of Receipt   |
|                          | Mailing Address P.O. Box 5360                              |   |                                     | 05 11 7 2007  |
|                          | City<br>mcallen  | State<br>TX                                   | Zip Code<br>78502                   | Transaction ID: SA11A1.6523  Amount of Each Receipt this Period |
|                          | FEC ID number of contributing federal political committee. | C   | 10002                               | 77.35   |
|                          | Name of Employer self-employed                             | Occupation private in                         | vestor                              | contribution  |
|                          | Receipt For:  Primary General  Other (specify) ▼           | Aggregate                                     | e Year-to-Date ▼ 347.80             |   |
| В.                       | Full Name (Last, First, Middle Initial) Ernie Perez        |   |                                     | Date of Receipt   |
|                          | Mailing Address P.O. Box 5360                              |   |                                     | 06 15 2007  |
|                          | City   | State   | Zip Code                            | Transaction ID: SA11A1.6652                                     |
|                          | mcallen  | TX  | 78502                               | Amount of Each Receipt this Period                              |
|                          | FEC ID number of contributing federal political committee. | С   |                                     | 62.63   |
|                          | Name of Employer self-employed                             | Occupation private in                         |                                     | contribution  |
|                          | Receipt For:   |   | e Year-to-Date ▼                    |   |
|                          | Primary General Other (specify) ▼                          |   | 410.43                              |   |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Claudia Pierson    |   |                                     | Date of Receipt   |
|                          | Mailing Address 6912 N. Peking                             |   |                                     | M M / D D / Y Y Y Y Y Y Y Y 12 0 0 7                            |
|                          | City   | State<br>TX                                   | Zip Code                            | Transaction ID: SA11A1.6402                                     |
|                          | mcallen  |   | 78501                               | Amount of Each Receipt this Period                              |
|                          | FEC ID number of contributing federal political committee. | C   |                                     | 250.00 contribution   |
|                          | Name of Employer Occupation selfemployed physicia          |   |                                     |   |
|                          | Receipt For:  Primary General  Other (specify) ▼           | Aggregate                                     | e Year-to-Date ▼<br>1000.00         |   |
| s                        | UBTOTAL of Receipts This Page (optional)                   |   |                                     | 389.98  |
| Т                        | OTAL This Period (last page this line number o             |   |                                     |   |

| SCHEDULE A (FEC Form 3X) |  |                      | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 92 / 123                    |
|--------------------------|--|----------------------|-------------------------------------|---|
| ITEMIZED RECEIPTS        |  |                      | or each category of the             | (check only one)                                  |
| •••                      |  |                      | Detailed Summary Page               | X   11a   11b   11c   12   13   14   15   16   17 |
| Δr                       | y information copied from such Reports and St              | ratements may        | y not he sold or used by any ners   |   |
| or                       | for commercial purposes, other than using the              | name and add         | dress of any political committee to | o solicit contributions from such committee.      |
| $\setminus$              | NAME OF COMMITTEE (In Full)                                |                      |                                     |   |
|                          | BORDER HEALTH FEDERAL PAC                                  |                      |                                     |   |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Claudia Pierson |                      |                                     | Date of Receipt                                   |
|                          | Mailing Address 6912 N. Peking                             |                      |                                     | 05 11 2007  |
|                          | City   | State                | Zip Code                            | Transaction ID: SA11A1.6524                       |
|                          | mcallen TX   |                      | 78501                               | Amount of Each Receipt this Period                |
|                          | FEC ID number of contributing federal political committee. | C                    |                                     | 250.00  |
|                          | Name of Employer selfemployed                              | Occupation physician |                                     | contribution                                      |
|                          | Receipt For:   |                      | Year-to-Date ▼                      |   |
|                          | Primary General  |                      | 1250.00                             | 7   |
|                          | Other (specify) ▼  | 0 0                  | 1230.00                             |   |
| В.                       | Full Name (Last, First, Middle Initial)<br>Claudia Pierson |                      |                                     | Date of Receipt                                   |
|                          | Mailing Address 6912 N. Peking                             |                      |                                     | 0 6 1 5 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y     |
|                          | City   | State                | Zip Code                            | Transaction ID: SA11A1.6653                       |
|                          | mcallen  | TX                   | 78501                               | Amount of Each Receipt this Period                |
|                          | FEC ID number of contributing federal political committee. | C                    |                                     | 250.00  |
|                          | Name of Employer selfemployed                              | Occupation physician |                                     | contribution                                      |
|                          | Receipt For:   |                      | Year-to-Date ▼                      |   |
|                          | Primary General  |                      | 1500.00                             | 1   |
|                          | Other (specify) ▼  | 0 0                  | 1500.00                             |   |
| C.                       | Full Name (Last, First, Middle Initial) Sergio Preciado    |                      |                                     | Date of Receipt                                   |
|                          | Mailing Address 521 E. Bluebird                            |                      |                                     | 04 / 12 / 2007                                    |
|                          | City   | State                | Zip Code                            | Transaction ID: SA11A1.6403                       |
|                          | mcallen  | TX                   | 78504                               | Amount of Each Receipt this Period                |
|                          | FEC ID number of contributing federal political committee. |                      |                                     | 163.58  |
| coltomployed             |  | Occupation physician |                                     | contribution                                      |
|                          | Receipt For:  Primary  General  Aggrega                    |                      | Year-to-Date ▼                      |   |
|                          |  |                      | 603.57                              | 7   |
|                          | Other (specify) ▼  |                      | 000.07                              |   |
| s                        | UBTOTAL of Receipts This Page (optional)                   |                      |                                     | 663.58  |
| H                        | . 5 (1 7   |                      | ·                                   |   |
| T                        | OTAL This Period (last page this line number of            | only)                |                                     |   |

| SCHEDULE A (FEC Form 3X)        |   |                      | Use separate schedule(s)            |                                     | 93 / 123 |
|---------------------------------|---|----------------------|-------------------------------------|-------------------------------------|----------|
| ITEMIZED RECEIPTS               |   |                      | or each category of the             | (check only one)                    | ٦        |
| ••                              |   |                      | Detailed Summary Page               | X 11a 11b 11c 15                    | 12       |
| Δη                              | w information conied from such Reports and St   | atements may         | not he sold or used by any nerso    |                                     |          |
| or                              | y information copied from such Reports and St for commercial purposes, other than using the | name and add         | dress of any political committee to | solicit contributions from such com | mittee.  |
| $\setminus$                     | NAME OF COMMITTEE (In Full)   |                      |                                     |                                     |          |
| $\geq$                          | BORDER HEALTH FEDERAL PAC   |                      |                                     |                                     |          |
| A.                              | Full Name (Last, First, Middle Initial) Sergio Preciado                                     |                      |                                     | Date of Receipt                     |          |
|                                 | Mailing Address 521 E. Bluebird   | 0                    | 7:01                                | 05 11                               | 2007     |
|                                 | City  | State                | Zip Code                            | Transaction ID: SA11A1.65           |          |
| mcallen TX                      |   | 17                   | 78504                               | Amount of Each Receipt this         | Period   |
|                                 | FEC ID number of contributing federal political committee.                                  | C                    |                                     |                                     | 172.61   |
|                                 | Name of Employer selfemployed   | Occupation physician |                                     | contribution                        |          |
|                                 | Receipt For:  | Aggregate            | e Year-to-Date ▼                    |                                     |          |
|                                 | Primary General   |                      | 776.18                              |                                     |          |
|                                 | Other (specify)   | 0 0                  |                                     |                                     |          |
| В.                              | Full Name (Last, First, Middle Initial) Sergio Preciado                                     |                      |                                     | Date of Receipt                     |          |
|                                 | Mailing Address 521 E. Bluebird   |                      |                                     | 0 6 1 5 / Y                         | 2007     |
|                                 | City  | State                | Zip Code                            | Transaction ID: SA11A1.66           |          |
|                                 | mcallen   | TX                   | 78504                               | Amount of Each Receipt this         | Period   |
|                                 | FEC ID number of contributing federal political committee.                                  | C                    |                                     |                                     | 139.77   |
|                                 | Name of Employer selfemployed   | Occupation           | n                                   | contribution                        |          |
|                                 | seirempioyea  | physiciar            | 1                                   |                                     |          |
|                                 | Receipt For:  | Aggregate            | e Year-to-Date ▼                    |                                     |          |
|                                 | Primary General Other (specify) ▼   |                      | 915.95                              |                                     |          |
| <u> </u>                        | Full Name (Last, First, Middle Initial) Sergio Ramirez                                      |                      |                                     | Date of Receipt                     |          |
|                                 | Mailing Address 1608 Woods Drive  |                      |                                     |                                     | 2 0 0 7  |
|                                 | City  | State                | Zip Code                            | Transaction ID: SA11A1.64           | 104      |
|                                 | mission   | TX                   | 78572                               | Amount of Each Receipt this         | Period   |
|                                 | FEC ID number of contributing federal political committee.                                  | C                    |                                     |                                     | 250.00   |
|                                 | Name of Employer selfemployed p   |                      |                                     | contribution                        |          |
|                                 | Receipt For:  | 1                    | e Year-to-Date ▼                    |                                     |          |
| Primary General Other (specify) |   |                      | 1000.00                             |                                     |          |
|                                 |   | 0 0                  | <u> </u>                            |                                     |          |
| s                               | UBTOTAL of Receipts This Page (optional)  |                      | 562.38                              |                                     |          |
| T                               | OTAL This Period (last page this line number o  | only)                |                                     |                                     |          |

PAGE 94 / 123 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC Full Name (Last, First, Middle Initial) Date of Receipt Sergio Ramirez Mailing Address 1608 Woods Drive 05 2007 11 City State Zip Code Transaction ID: SA11A1.6526 TX mission 78572 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. contribution Name of Employer selfemployed Occupation physician Aggregate Year-to-Date ▼ Receipt For: Primary General 1250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sergio Ramirez Date of Receipt Mailing Address 1608 Woods Drive 0 6 15 2007 City State Zip Code Transaction ID: SA11A1.6655 mission TX 78572 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer selfemployed Occupation physician Receipt For: Aggregate Year-to-Date V Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Gustavo Ramos Date of Receipt Mailing Address 1301 S. Perking 0.4 12 2007 City State Zip Code Transaction ID: SA11A1.6405 mcallen TX 78501 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer selfemployed Occupation physicain Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional) .....

| SCHEDULE A (FEC Form 3X) |  |   | Use separate schedule(s)                           | FOR LINE NUMBER: PAGE 95 / 123                                 |
|--------------------------|--|---|--|--|
| ITEMIZED RECEIPTS        |  | or each category of the Detailed Summary Page | (check only one)  X 11a 11b 11c 12  13 14 15 16 17 |  |
| Ar                       | ny information copied from such Reports and Sta<br>for commercial purposes, other than using the r   | atements may                                  | not be sold or used by any perso                   | n for the purpose of soliciting contributions                  |
| Š                        | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  | and and add                                   | areas of any political committee to                | Solidit Contributions from Such Solimittees.                   |
| Α.                       | Full Name (Last, First, Middle Initial) Gustavo Ramos Mailing Address 1301 S. Perking  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed | State TX  C Occupation physicair              |  | Date of Receipt    M M   |
|                          | Receipt For: Primary General Other (specify)   |   | Year-to-Date ▼<br>1250.00                          |  |
| В.                       | Full Name (Last, First, Middle Initial) Gustavo Ramos Mailing Address 1301 S. Perking  |   |  | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |
|                          | City   | State   | Zip Code   | Transaction ID: SA11A1.6656                                    |
|                          | mcallen  FEC ID number of contributing federal political committee.  Name of Employer  | TX C  | 78501  | Amount of Each Receipt this Period  250.00  contribution       |
|                          | Name of Employer selfemployed  Receipt For:  Primary General Other (specify) ▼   | physicair                                     |  |  |
| C.                       | Full Name (Last, First, Middle Initial) R.V. Reddy Mailing Address 1500 Southland Drive  |   |  | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
|                          | City<br>weslaco  | State<br>TX                                   | Zip Code<br>78596                                  | Transaction ID: SA11A1.6406                                    |
|                          | FEC ID number of contributing federal political committee.   | C   | 78390  | Amount of Each Receipt this Period  250.00                     |
|                          | Name of Employer selfemployed  Receipt For:  Primary General Other (specify) ▼   | Occupation physician Aggregate                |  | contribution   |
| s                        | UBTOTAL of Receipts This Page (optional)   |   |  | 750.00   |
| Т                        | OTAL This Period (last page this line number o   |   |  |  |

| S               | CHEDULE A (FEC Form 3X)  |  | Han annount out 117   | FOR LINE NUMBER: PAGE 96 / 123  |
|-----------------|--|--|---|---|
|                 | EMIZED RECEIPTS  | Use separate schedule(s) or each category of the |   | (check only one)  |
| 11              | EMIZED RECEIPTS  |  | Detailed Summary Page   | X 11a 11b 11c 12  |
|                 |  |  |   | 13   14   15   16   17  |
| Ar<br>or        | ly information copied from such Reports and Sta<br>for commercial purposes, other than using the n | itements may<br>ame and add                      | not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ }$ | NAME OF COMMITTEE (In Full)  |  |   |   |
| $\rangle$       | BORDER HEALTH FEDERAL PAC  |  |   |   |
| ۹.              | Full Name (Last, First, Middle Initial)<br>R.V. Reddy  |  |   | Date of Receipt   |
|                 | Mailing Address 1500 Southland Drive   |  |   | 05 11 7 2007  |
|                 | City   | State  | Zip Code  | Transaction ID: SA11A1.6528   |
|                 | weslaco  | TX   | 78596   | Amount of Each Receipt this Period  |
|                 | FEC ID number of contributing federal political committee.   | С  |   | 250.00  |
|                 | Name of Employer selfemployed  | Occupation                                       |   | contribution  |
|                 | Receipt For:   | <u> </u>   | Year-to-Date ▼  | _   |
|                 | Primary General  | 33 -3  |   | 1   |
|                 | Other (specify) ▼  | 0 0  | 1250.00   |   |
| 3.              | Full Name (Last, First, Middle Initial)<br>R.V. Reddy  |  |   | Date of Receipt   |
|                 | Mailing Address 1500 Southland Drive   | 0 6 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y      |   |   |
|                 | City   | Zip Code   | Transaction ID: SA11A1.6657   |   |
|                 | weslaco  | TX   | 78596   | Amount of Each Receipt this Period  |
|                 | FEC ID number of contributing federal political committee.   | C  |   | 250.00  |
|                 | Name of Employer selfemployed  | Occupation physician                             |   | contribution  |
|                 | Receipt For:   | Aggregate  | e Year-to-Date ▼  |   |
|                 | Primary General Other (specify) ▼  |  | 1500.00   |   |
| _               | Full Name (Last, First, Middle Initial)  |  |   | Date of Descire   |
| J.              | Alvaro Restrepo  Mailing Address 120 Bluebird  |  |   | Date of Receipt   |
|                 |  |  |   | 04 12 2007  |
|                 | City   | State  | Zip Code  | Transaction ID: SA11A1.6407   |
|                 | mcallen  | TX   | 78504   | Amount of Each Receipt this Period  |
|                 | FEC ID number of contributing federal political committee.   | C  |   | 250.00  |
|                 | Name of Employer selfemployed  | Occupation physician                             |   | contribution  |
|                 | Receipt For:   | Aggregate  | e Year-to-Date ▼  | 7   |
|                 | Primary General  |  | 1000.00   |   |
|                 | Other (specify) ▼  | 0 0  |   |   |
| s               | UBTOTAL of Receipts This Page (optional)   |  |   | 750.00  |
| T               | OTAL This Period (last page this line number or  | nly)   |   |   |
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| S  | SCHEDULE A (FEC Form 3X)                                    |                         | llas seperata achadula(a)           | FOR LINE NUMBER: PAGE 97 / 123              |
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| ITEMIZED RECEIPTS  |   | or each category of the |                                     | (check only one)                            |
| ••   | LIMIZED HEOLII 10   | Detailed Summary Page   |                                     | X 11a 11b 11c 12                            |
| Δr   | y information copied from such Reports and Si               | tatamente may           | rnot he cold or used by any nore    | 13 14 15 16 17                              |
| or   | for commercial purposes, other than using the               | name and add            | dress of any political committee to | osolicit contributions from such committee. |
| $\setminus$  | NAME OF COMMITTEE (In Full)                                 |                         |                                     |   |
|  | BORDER HEALTH FEDERAL PAC                                   |                         |                                     |   |
| A.   |   |                         |                                     | Date of Receipt                             |
|  | Mailing Address 1117 S. Cynthia                             |                         |                                     | 04 12 2007                                  |
|  | City  | State                   | Zip Code                            | Transaction ID: SA11A1.6408                 |
|  | mcallen T.  |                         | 78504                               | Amount of Each Receipt this Period          |
|  | FEC ID number of contributing federal political committee.  | C                       |                                     | 250.00                                      |
|  | Name of Employer selfemployed                               | Occupation physician    |                                     | contribution                                |
|  | Receipt For:  |                         | Year-to-Date ▼                      |   |
|  | Primary General   |                         | 1000.00                             | 7   |
|  | Other (specify) ▼   |                         | 1000.00                             |   |
| В.   | Full Name (Last, First, Middle Initial) William Restrepo    |                         |                                     | Date of Receipt                             |
|  | Mailing Address 1117 S. Cynthia                             |                         |                                     | 0 5 1 1 2 0 0 7                             |
|  | City  | State                   | Zip Code                            | Transaction ID: SA11A1.6529                 |
|  | mcallen   | TX 78504                |                                     | Amount of Each Receipt this Period          |
|  | FEC ID number of contributing federal political committee.  | C                       |                                     | 250.00                                      |
|  | Name of Employer selfemployed                               | Occupation physician    |                                     | contribution                                |
|  | Receipt For:  |                         | Year-to-Date ▼                      |   |
|  | Primary General   | 00 0                    | 1050.00                             | 7   |
|  | Other (specify) ▼   |                         | 1250.00                             |   |
| C.   | Full Name (Last, First, Middle Initial)<br>William Restrepo |                         |                                     | Date of Receipt                             |
|  | Mailing Address 1117 S. Cynthia                             |                         |                                     | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
|  | City  | State                   | Zip Code                            | Transaction ID: SA11A1.6658                 |
|  | mcallen   | TX                      | 78504                               | Amount of Each Receipt this Period          |
| FEC ID number of contributing federal political committee. |   | C                       |                                     | 250.00                                      |
|  | Name of Employer selfemployed Physics Receipt For: Aggr     |                         |                                     | contribution                                |
|  |   |                         | e Year-to-Date ▼                    |   |
|  | Primary General   |                         | 1500.00                             | 7   |
|  | Other (specify) ▼   | 0 0                     | 1000.00                             | 1   |
| s  | UBTOTAL of Receipts This Page (optional)                    |                         |                                     | 750.00                                      |
| F  | ,   |                         | ·                                   |   |
| T  | OTAL This Period (last page this line number                | only)                   |                                     |   |

|          | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS   |                   | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:   PAGE 98 / 123   (check only one)                  |
|----------|---|-------------------|--|--|
| Ar       | y information copied from such Reports and Statements for commercial purposes, other than using the name an | ts may            | not be sold or used by any persolress of any political committee to    | on for the purpose of soliciting contributions                       |
|          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |                   |  |  |
| Α.       | Full Name (Last, First, Middle Initial)<br>Homero Rivas   |                   |  | Date of Receipt  |
|          | Mailing Address 100 E. Houston  |                   |  | 0 4 1 2 2 0 0 7  |
|          | City Stat mcallen TX  |                   | Zip Code<br>78501  | Transaction ID: SA11A1.6409  Amount of Each Receipt this Period      |
|          | FEC ID number of contributing federal political committee.  |                   |  | 250.00   |
|          | saltemployed  | upation<br>sician |  | contribution   |
|          | Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼ ☐ Aggr  | regate            | Year-to-Date ▼ 1000.00   |  |
| В.       | Full Name (Last, First, Middle Initial)<br>Homero Rivas   |                   |  | Date of Receipt  |
|          | Mailing Address 100 E. Houston  |                   |  | 05 11 7 2007   |
|          | City State Zip Code mcallen TX 78501  |                   |  | Transaction ID: SA11A1.6530  |
|          | FEC ID number of contributing federal political committee.  |                   | 76301  | Amount of Each Receipt this Period  250.00                           |
|          | salfamplovad  | upation<br>sician |  | contribution   |
|          | Receipt For:  Primary  General  Other (specify) ▼   | regate            | Year-to-Date ▼<br>1250.00  |  |
| <u> </u> | Full Name (Last, First, Middle Initial) Homero Rivas  |                   |  | Date of Receipt  |
|          | Mailing Address 100 E. Houston  |                   |  | M M / D D / Y Y Y Y Y Y Y Y Y 15 15 15 15 15 15 15 15 15 15 15 15 15 |
|          | City Stat   |                   | Zip Code   | Transaction ID: SA11A1.6659  |
|          | mcallen TX  FEC ID number of contributing federal political committee.                                      |                   | 78501  | Amount of Each Receipt this Period  250.00                           |
|          | coltomployed  | upation<br>sician |  | contribution   |
|          | Receipt For:  Primary  General  Other (specify) ▼   | regate            | Year-to-Date ▼<br>1500.00  |  |
| s        | UBTOTAL of Receipts This Page (optional)  |                   |  | 750.00   |
| Т        | OTAL This Period (last page this line number only)  |                   |  |  |

| SCHEDULE A (FEC Form 3X) |  |                         |                                     | FOR LINE NUMBER: PAGE 99 / 123                        |  |
|--------------------------|--|-------------------------|-------------------------------------|---|--|
|                          | •  |                         | Use separate schedule(s)            | (check only one)                                      |  |
| ΙT                       | EMIZED RECEIPTS  | or each category of the |                                     | X 11a 11b 11c 12                                      |  |
|                          |  |                         | Detailed Summary Page               | 13 14 15 16 17  |  |
| Δr                       | y information copied from such Reports and St              | atements may            | y not he sold or used by any ners   |   |  |
| or                       | for commercial purposes, other than using the              | name and add            | dress of any political committee to | solicit contributions from such committee.            |  |
|                          | NAME OF COMMITTEE (In Full)                                |                         |                                     |   |  |
| $ \rangle$               | BORDER HEALTH FEDERAL PAC                                  |                         |                                     |   |  |
|                          |  |                         |                                     |   |  |
|                          | Full Name (Last, First, Middle Initial)                    |                         |                                     |   |  |
| A.                       | Benjamin Robalino  |                         |                                     | Date of Receipt                                       |  |
|                          | Mailing Address 1217 S. Cynthia                            |                         |                                     | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ |  |
|                          | City   | State                   | Zip Code                            |   |  |
|                          | mcallen  | TX                      | ·                                   | Transaction ID: SA11A1.6410                           |  |
|                          |  | 1/                      | 78501                               | Amount of Each Receipt this Period                    |  |
|                          | FEC ID number of contributing federal political committee. | C                       |                                     | 250.00  |  |
|                          | rederai politicai committee.                               |                         |                                     |   |  |
|                          | Name of Employer   | Occupation              | า                                   | contribution  |  |
|                          | selfemployed   | physcian                |                                     |   |  |
|                          | Receipt For:   | Aggregate               | e Year-to-Date ▼                    |   |  |
|                          | Primary General  |                         | 1000.00                             | 7   |  |
|                          | Other (specify)  | 0 0                     | 1000.00                             |   |  |
|                          |  |                         |                                     |   |  |
| В.                       | Full Name (Last, First, Middle Initial) Benjamin Robalino  |                         |                                     | Date of Receipt                                       |  |
| Ь.                       |  |                         |                                     | <u> </u>  |  |
|                          | Mailing Address 1217 S. Cynthia                            |                         |                                     | 05 11 2007  |  |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6531                           |  |
|                          | mcallen  | TX                      | 78501                               | Amount of Each Receipt this Period                    |  |
|                          | FEC ID number of contributing                              |                         |                                     |   |  |
|                          | federal political committee.                               | C                       |                                     | 250.00  |  |
|                          |  |                         |                                     | contribution  |  |
|                          | Name of Employer selfemployed                              | Occupation              |                                     |   |  |
|                          | Descipt For:   | physcian                |                                     | _   |  |
|                          | Receipt For:    Primary   General                          | Aggregate               | e Year-to-Date ▼                    |   |  |
|                          | Other (specify)  | ' '                     | 1250.00                             |   |  |
|                          | Caller (openity) V   | 0 0                     | 1 1 1 1 1 1 1                       | 4   |  |
|                          | Full Name (Last, First, Middle Initial)                    |                         |                                     |   |  |
| C.                       | Benjamin Robalino  |                         |                                     | Date of Receipt                                       |  |
|                          | Mailing Address 1217 S. Cynthia                            |                         |                                     | M M / D D / Y Y Y Y                                   |  |
|                          |  |                         |                                     | 06 15 2007  |  |
|                          | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6660                           |  |
|                          | mcallen  | TX                      | 78501                               | Amount of Each Receipt this Period                    |  |
|                          | FEC ID number of contributing                              | С                       |                                     | 250.00  |  |
|                          | federal political committee.                               |                         |                                     |   |  |
|                          | Name of Employer selfemployed                              | Occupation              | <u> </u>                            | contribution  |  |
|                          | seltemployed   | physcian                |                                     |   |  |
|                          | Receipt For:   | Aggregate               | Year-to-Date ▼                      |   |  |
|                          | Primary General  |                         | 1500.00                             | 7   |  |
|                          | Other (specify) ▼  |                         | 1500.00                             | <u> </u>  |  |
| _                        |  |                         |                                     |   |  |
|                          |  |                         |                                     | 750.00  |  |
| S                        | UBTOTAL of Receipts This Page (optional)                   |                         |                                     | 750.00  |  |
|                          |  |                         |                                     |   |  |

| S                 | CHEDULE A (FEC Form 3X)  |   | Harris and a selection of the selection (s)                             | FOR LINE NUMBER: PAGE 100 / 123  |   |
|-------------------|--|---|---|--|---|
| ITEMIZED RECEIPTS |  |   | Use separate schedule(s)<br>or each category of the                     | (check only one)   |   |
| 11                | EMIZED RECEIPTS  |   | Detailed Summary Page   | X 11a 11b 11c 12   |   |
|                   |  |   |   |  | 7 |
| Ar<br>or          | ny information copied from such Reports and Stat<br>for commercial purposes, other than using the na | ements may<br>ime and add                 | not be sold or used by any perso<br>dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |   |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full)  |   |   |  |   |
| $\rangle$         | BORDER HEALTH FEDERAL PAC  |   |   |  |   |
| ۹.                | Full Name (Last, First, Middle Initial)<br>Jose Rodriquez  |   |   | Date of Receipt  |   |
|                   | Mailing Address 8500 N. Taylor   |   |   | 04 12 2007   |   |
|                   | City   | State                                     | Zip Code  | Transaction ID: SA11A1.6411  |   |
|                   | mcallen  | TX  | 78504   | Amount of Each Receipt this Period   |   |
|                   | FEC ID number of contributing federal political committee.   | С   |   | 75.34  |   |
|                   | Name of Employer selfemployed  | Occupation physician                      |   | contribution   |   |
|                   | Receipt For:   | <u> </u>                                  | Year-to-Date ▼  | -  |   |
|                   | Primary General  | 7.99.094.0                                |   | 1  |   |
|                   | Other (specify) ▼  |   | 460.39  |  |   |
| 3.                | Full Name (Last, First, Middle Initial) Jose Rodriquez   |   |   | Date of Receipt  |   |
|                   | Mailing Address 8500 N. Taylor   | 05 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |   |  |   |
|                   | City   | State                                     | Zip Code  | Transaction ID: SA11A1.6532  |   |
|                   | mcallen  | TX  | 78504   | Amount of Each Receipt this Period   |   |
|                   | FEC ID number of contributing federal political committee.   | С   |   | 79.50  |   |
|                   | Name of Employer selfemployed  | Occupation physician                      |   | contribution   |   |
|                   | Receipt For:   |   | Year-to-Date ▼  | 7  |   |
|                   | Primary General  |   | 500.00  | 1  |   |
|                   | Other (specify) ▼  | 0 0                                       | 539.89  |  |   |
| Э.                | Full Name (Last, First, Middle Initial)<br>Jose Rodriquez  |   |   | Date of Receipt  |   |
|                   | Mailing Address 8500 N. Taylor   |   |   | 06 15 2007   |   |
|                   | City   | State                                     | Zip Code  | Transaction ID: SA11A1.6661  |   |
|                   | mcallen  | TX  | 78504   | Amount of Each Receipt this Period   |   |
|                   | FEC ID number of contributing federal political committee.   | С   |   | 64.37  |   |
|                   | Name of Employer selfemployed  | Occupation physician                      |   | contribution   |   |
|                   | Receipt For:   | • •                                       | Year-to-Date ▼  | 7  |   |
|                   | Primary General  |   | 604.06  |  |   |
|                   | Other (specify) ▼  |   | 604.26  |  |   |
| s                 | UBTOTAL of Receipts This Page (optional)   |   |   | 219.21   |   |
|                   |  |   | <u> </u>  |  | 1 |
| T                 | OTAL This Period (last page this line number on  | ly)                                       | <b>&gt;</b>   |  | 4 |

| SCHEDULE A (FEC Form 3X)               |  |   | Use separate schedule(s)  | FOR LINE NUMBER: PAGE 101 / 123                                 |
|--|--|---|---|---|
| ITEMIZED RECEIPTS                      |  | or each category of the Detailed Summary Page | (check only one)  X 11a 11b 11c 12  |   |
|  | · ····································   |   |   | 13 14 15 16 17  |
| or                                     | ny information copied from such Reports and Sta<br>for commercial purposes, other than using the n | ame and add                                   | rnot be sold or used by any person<br>dress of any political committee to | solicit contributions from such committee.                      |
| $\setminus$                            | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  |   |   |   |
| Α.                                     | Full Name (Last, First, Middle Initial)<br>Paulette Saca   |   |   | Date of Receipt   |
|  | Mailing Address 109 Condor   |   |   | 04 12 2007  |
|  | City<br>mcallen  | State<br>TX                                   | Zip Code<br>78504   | Transaction ID: SA11A1.6412  Amount of Each Receipt this Period |
|  | FEC ID number of contributing federal political committee.   | C   |   | 125.00  |
|  | Name of Employer self-employed   | Occupation private in                         |   | contribution  |
|  | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                                     | e Year-to-Date ▼ 500.00   |   |
| В.                                     | Full Name (Last, First, Middle Initial) Paulette Saca  |   |   | Date of Receipt   |
|  | Mailing Address 109 Condor   |   |   | 05 11 2007  |
|  | City   | State   | Zip Code  | Transaction ID: SA11A1.6533                                     |
|  | mcallen  | TX  | 78504   | Amount of Each Receipt this Period                              |
|  | FEC ID number of contributing federal political committee.   | C   |   | 125.00  |
|  | Name of Employer self-employed   | Occupation private in                         |   | contribution  |
|  | Receipt For:   | Aggregate                                     | e Year-to-Date ▼  |   |
|  | Primary General Other (specify) ▼  |   | 625.00  |   |
| <u>с</u> .                             | Full Name (Last, First, Middle Initial) Paulette Saca  |   |   | Date of Receipt   |
|  | Mailing Address 109 Condor   |   |   | 06 15 7 2007  |
|  | City   | State   | Zip Code  | Transaction ID: SA11A1.6662                                     |
|  | mcallen  | TX  | 78504   | Amount of Each Receipt this Period                              |
|  | FEC ID number of contributing federal political committee.   | C   |   | 125.00 contribution   |
| Name of Employer Occupation private in |  |   | vestor  | Contribution  |
|  | Receipt For:  Primary General  Other (specify) ▼   | Aggregate                                     | e Year-to-Date ▼ 750.00   |   |
| s                                      | UBTOTAL of Receipts This Page (optional)   |   |   | 375.00  |
| Т                                      | OTAL This Period (last page this line number or  | าly)  |   |   |

| SCHEDULE A (FEC Form 3X)                                   |  |                         | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 102 / 123              |
|--|--|-------------------------|-------------------------------------|--|
| ITEMIZED RECEIPTS  |  | or each category of the |                                     | (check only one)                             |
|  |  |                         | Detailed Summary Page               | X 11a 11b 11c 12<br>13 14 15 16 17           |
| Δr   | ay information copied from such Reports and S  | tatemente may           | y not be sold or used by any ners   |  |
| or   | ny information copied from such Reports and S<br>for commercial purposes, other than using the | name and add            | dress of any political committee to | o solicit contributions from such committee. |
| $\setminus$  | NAME OF COMMITTEE (In Full)  |                         |                                     |  |
|  | BORDER HEALTH FEDERAL PAC  |                         |                                     |  |
| _  | Full Name (Last, First, Middle Initial)  |                         |                                     |  |
| A.   | Javier Saenz  Mailing Address 2308 Monaco Drive  |                         |                                     | Date of Receipt                              |
|  | 2306 MONACO DIIVE  |                         |                                     | 04 12 2007                                   |
|  | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6413                  |
|  | mission  | TX                      | 78574                               | Amount of Each Receipt this Period           |
|  | FEC ID number of contributing federal political committee.                                     | C                       |                                     | 250.00                                       |
|  | Name of Employer selfemployed  | Occupation              |                                     | contribution                                 |
|  | Receipt For:   | physiciar               | Year-to-Date ▼                      | _  |
|  | Primary General  | Aggregate               | FIGAI-10-Date ▼                     | 7  |
|  | Other (specify) ▼  |                         | 1000.00                             |  |
|  |  |                         |                                     |  |
| В.   | Full Name (Last, First, Middle Initial) Javier Saenz   |                         |                                     | Date of Receipt                              |
|  | Mailing Address 2308 Monaco Drive  |                         |                                     | M M / D D / Y Y Y Y                          |
|  |  |                         |                                     | 05 11 2007                                   |
|  | City   | State                   | Zip Code                            | Transaction ID: SA11A1.6534                  |
|  | mission  | TX                      | 78574                               | Amount of Each Receipt this Period           |
|  | FEC ID number of contributing federal political committee.                                     | C                       |                                     | 250.00                                       |
|  | Name of Employer selfemployed  | Occupation physician    |                                     | contribution                                 |
|  | Receipt For:   |                         | Year-to-Date ▼                      | $\dashv$                                     |
|  | Primary General  | 7 199. 094.0            |                                     | 7  |
|  | Other (specify) ▼  | 0 0                     | 1250.00                             |  |
| <u> </u>   | Full Name (Last, First, Middle Initial) Javier Saenz   | -                       |                                     | Date of Receipt                              |
|  | Mailing Address 2308 Monaco Drive  |                         |                                     | M M / D D / Y Y Y Y                          |
|  | <del></del>  |                         |                                     | 06 15 2007                                   |
|  | City<br>mission  | State<br>TX             | Zip Code                            | Transaction ID: SA11A1.6663                  |
|  |  | 1/                      | 78574                               | Amount of Each Receipt this Period           |
| FEC ID number of contributing federal political committee. |  | C                       |                                     | 250.00                                       |
|  | Name of Employer selfemployed  Receipt For:  |                         | 1<br>1                              | contribution                                 |
|  |  |                         | e Year-to-Date ▼                    |  |
| Primary General Other (specify) ▼                          |  |                         | 1500.00                             | 7  |
|  |  |                         | 1300.00                             | 1  |
| Г  |  |                         |                                     |  |
| s  | UBTOTAL of Receipts This Page (optional)   |                         |                                     | 750.00                                       |
|  | OTAL This Period (last page this line number   | only)                   |                                     |  |
| , ,  |  |                         |                                     |  |

| SCHEDULE A (FEC Form 3X)          |   |  | Use separate schedule(s)          | FOR LINE NUMBER: PAGE 103 / 123                                 |
|-----------------------------------|---|--|-----------------------------------|---|
| ITEMIZED RECEIPTS                 |   |  | or each category of the           | (check only one)  |
| •••                               |   |  | Detailed Summary Page             | X   11a   11b   11c   12   15   16   17                         |
| Δr                                | y information copied from such Reports and St   | atements may                                 | y not he sold or used by any ners |   |
| or                                | for commercial purposes, other than using the   | o solicit contributions from such committee. |                                   |   |
| $\setminus$                       | NAME OF COMMITTEE (In Full)                     |  |                                   |   |
| $ \rangle$                        | BORDER HEALTH FEDERAL PAC                       |  |                                   |   |
| <u></u>                           | Full Name (Last, First, Middle Initial)         |  |                                   |   |
| A.                                |   |  |                                   | Date of Receipt   |
|                                   | Mailing Address 2400 S.E. Augusta Squ           | ıare   |                                   | M M / D D / Y Y Y Y   |
|                                   | City  | State  | Zip Code                          | 04 12 2007  |
|                                   | City Si mcallen T.                              |  | 78503                             | Transaction ID: SA11A1.6414  Amount of Each Receipt this Period |
|                                   | FEC ID number of contributing                   |  | 70000                             |   |
|                                   | federal political committee.                    | C  |                                   | 250.00  |
|                                   | Name of Employer                                | Occupation                                   | n                                 | contribution  |
|                                   | Name of Employer selfemployed                   | physician                                    |                                   |   |
|                                   | Receipt For:                                    |  | e Year-to-Date ▼                  |   |
|                                   | Primary General                                 |  | 1000.00                           | 7   |
|                                   | Other (specify) ▼                               |  | 1000.00                           |   |
| _                                 | Full Name (Last, First, Middle Initial)         |  |                                   |   |
| В.                                |   |  |                                   | Date of Receipt   |
|                                   | Mailing Address 2400 S.E. Augusta Squ           | ıare   |                                   | 0.5 1.1 2.00.7  |
|                                   | City  |  | Zip Code                          |   |
|                                   | mcallen   | State<br>TX                                  | 78503                             | Transaction ID: SA11A1.6535  Amount of Each Receipt this Period |
|                                   | FEC ID number of contributing                   |  | 70000                             |   |
|                                   | federal political committee.                    | C  |                                   | 250.00  |
|                                   | Name of Employer                                | Occupation                                   | n                                 | contribution  |
|                                   | selfemployed                                    | physician                                    |                                   |   |
|                                   | Receipt For:                                    |  | Year-to-Date ▼                    |   |
|                                   | Primary General                                 | -  | 1250.00                           | 1   |
|                                   | Other (specify)                                 |  | 1230.00                           |   |
| _                                 | Full Name (Last, First, Middle Initial)         |  |                                   |   |
| C.                                | JJ Saenz  |  |                                   | Date of Receipt   |
|                                   | Mailing Address 2400 S.E. Augusta Squ           | ıare   |                                   | 0 6 1 5 2 0 0 7   |
|                                   | City  | State  | Zip Code                          | Transaction ID: SA11A1.6664                                     |
|                                   | <u>mcallen</u>                                  | TX   | 78503                             | Amount of Each Receipt this Period                              |
|                                   | FEC ID number of contributing                   | С  |                                   | 250.00  |
|                                   | Name of Employer selfemployed                   |  |                                   | 230.00  |
|                                   |   |  | 1                                 | contribution  |
|                                   |   |  |                                   |   |
|                                   |   | Aggregate                                    | e Year-to-Date ▼                  |   |
| Primary General Other (specify) ▼ |   |  | 1500.00                           |   |
|                                   |   | 0 0  | 0 0 0 0 0 0 0                     | -   |
|                                   |   |  |                                   | 77000   |
| s                                 | UBTOTAL of Receipts This Page (optional)        |  |                                   | 750.00  |
|                                   |   |  |                                   |   |
| $\mathbf{I}^{T}$                  | OTAL This Period (last page this line number of | oniy)  |                                   |   |

## S

| SCHEDULE A (FEC Form 3X) |   |  | lles servets selective(s)   | FOR LINE NUMBER: PAGE 104 / 123   |
|--------------------------|---|--|---|---|
| ITEMIZED RECEIPTS        |   | Use separate schedule(s) or each category of the |   | (check only one)  |
| 11                       | EINIZED RECEIPTS  |  | Detailed Summary Page   | X 11a 11b 11c 12  |
|                          |   |  |   | 13 14 15 16 17  |
| Ar<br>or                 | y information copied from such Reports and Sta<br>for commercial purposes, other than using the i | atements may<br>name and ado                     | not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
|                          | NAME OF COMMITTEE (In Full)   |  | , , , , , , , , , , , , , , , , , , ,                                   |   |
| $ \rangle$               | BORDER HEALTH FEDERAL PAC   |  |   |   |
|                          |   |  |   |   |
|                          | Full Name (Last, First, Middle Initial)   |  |   |   |
| A.                       | Larry Safir   |  |   | Date of Receipt   |
|                          | Mailing Address 3300 S. 2nd suite 10  |  |   | 04 12 2007  |
|                          | City  | State  | Zip Code  | Transaction ID: SA11A1.6374   |
|                          | <u>mcallen</u>  | TX   | 78503   | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing   |  |   | 050.00  |
|                          | federal political committee.  | C  |   | 250.00  |
|                          | Name of Employer  | Occupation                                       | <u> </u>  | contribution  |
|                          | self-employed   | private in                                       |   |   |
|                          | Receipt For:  |  | Year-to-Date ▼  |   |
|                          | Primary General   | 00 0   |   | 1   |
|                          | Other (specify) ▼   |  | 1000.00   |   |
|                          |   |  |   |   |
| В.                       | Full Name (Last, First, Middle Initial)<br>Larry Safir  |  |   | Date of Receipt   |
| υ.                       | Mailing Address 3300 S. 2nd   |  |   | M M / D D / Y Y Y Y   |
|                          | suite 10  |  |   | 05 11 2007  |
|                          | City  | State  | Zip Code  | Transaction ID: SA11A1.6496   |
|                          | mcallen   | TX   | 78503   | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing   | С  |   | 250.00  |
|                          | federal political committee.  |  |   |   |
|                          | Name of Employer  | Occupation                                       | 1   | contribution  |
|                          | self-employed   | private in                                       | vestor  |   |
|                          | Receipt For:  | Aggregate  | Year-to-Date ▼  |   |
|                          | Primary General   |  | 1250.00   | 1   |
|                          | Other (specify)   |  | 1200.00   |   |
|                          | Full Name (Last, First, Middle Initial)   |  |   |   |
| C.                       | Larry Safir   |  |   | Date of Receipt   |
|                          | Mailing Address 3300 S. 2nd   |  |   | M M / D D / Y Y Y Y   |
|                          | suite 10  | 01-1-  | 7'- 0-4-  | 06 15 2007  |
|                          | City  | State  | Zip Code  | Transaction ID: SA11A1.6621   |
|                          | mcallen   | TX   | 78503   | Amount of Each Receipt this Period  |
|                          | FEC ID number of contributing federal political committee.  | C  |   | 250.00  |
|                          | ·   |  |   | contribution  |
|                          | Name of Employer self-employed  | Occupation                                       |   | Contribution  |
|                          |   | private in                                       |   | _   |
|                          | Receipt For: A Primary General  |  | Year-to-Date ▼  | ,   |
|                          | Other (specify)   |  | 1500.00   |   |
|                          |   |  |   | 1   |
|                          |   |  |   |   |
| s                        | UBTOTAL of Receipts This Page (optional)  |  |   | 750.00  |
| $\vdash$                 |   |  |   | -   |

| S                | CHEDULE A (FEC Form 3X)                                    |                      | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 105 / 123                     |
|------------------|--|----------------------|-------------------------------------|---|
| TEMIZED RECEIPTS |  |                      | or each category of the             | (check only one)                                    |
| •                | LIMIZED RECEIL TO  |                      | Detailed Summary Page               | X   11a     11b     11c     12     15     16     17 |
| Δn               | y information copied from such Reports and Sta             | itements may         | v not be sold or used by any perso  |   |
| or               | for commercial purposes, other than using the r            | ame and add          | dress of any political committee to | solicit contributions from such committee.          |
| $\overline{\ }$  | NAME OF COMMITTEE (In Full)                                |                      |                                     |   |
| $\rangle$        | BORDER HEALTH FEDERAL PAC                                  |                      |                                     |   |
| ۹.               | Full Name (Last, First, Middle Initial)<br>Mariano Salinas |                      |                                     | Date of Receipt                                     |
|                  | Mailing Address 2007 Brazos Court                          |                      |                                     | 04 12 2007  |
|                  | City   | State                | Zip Code                            | Transaction ID: SA11A1.6554                         |
|                  | mission  | TX                   | 78572                               | Amount of Each Receipt this Period                  |
|                  | FEC ID number of contributing federal political committee. | C                    |                                     | 250.00  |
|                  | Name of Employer selfemployed                              | Occupation           |                                     | contribution  |
|                  | Receipt For:   | <u> </u>             | Year-to-Date ▼                      | +   |
|                  | Primary General  | 7.99.094.0           |                                     | 1   |
|                  | Other (specify) ▼  |                      | 1000.00                             |   |
| 3.               | Full Name (Last, First, Middle Initial) Mariano Salinas    |                      |                                     | Date of Receipt                                     |
|                  | Mailing Address 2007 Brazos Court                          |                      |                                     | 05 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y           |
|                  | City   | State                | Zip Code                            | Transaction ID: SA11A1.6536                         |
|                  | mission  | TX                   | 78572                               | Amount of Each Receipt this Period                  |
|                  | FEC ID number of contributing federal political committee. | C                    |                                     | 250.00  |
|                  | Name of Employer selfemployed                              | Occupation physician |                                     | contribution  |
|                  | Receipt For:   | · · ·                | e Year-to-Date ▼                    |   |
|                  | Primary General Other (specify) ▼                          |                      | 1250.00                             |   |
| _                | Full Name (Last, First, Middle Initial)                    |                      |                                     |   |
| j.               | Mariano Salinas  |                      |                                     | Date of Receipt                                     |
|                  | Mailing Address 2007 Brazos Court                          |                      |                                     | 06 15 2007  |
|                  | City<br>mission  | State<br>TX          | Zip Code<br>78572                   | Transaction ID: SA11A1.6665                         |
|                  |  |                      | 10312                               | Amount of Each Receipt this Period                  |
|                  | FEC ID number of contributing federal political committee. | C                    |                                     | 250.00  |
|                  | Name of Employer selfemployed                              | Occupation physician |                                     | contribution  |
|                  | Receipt For:   | Aggregate            | e Year-to-Date ▼                    |   |
|                  | Primary General Other (specify) ▼                          |                      | 1500.00                             |   |
| S                | LUBTOTAL of Receipts This Page (optional)                  |                      |                                     | 750.00  |
| _                |  |                      |                                     | -   |
| T                | OTAL This Period (last page this line number o             | nly)                 |                                     |   |

| SCHEDULE A (FEC Form 3X)                    |   |  | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 106 / 123    |     |
|---|---|--|-------------------------------------|------------------------------------|-----|
| ITEMIZED RECEIPTS                           |   |  | or each category of the             | (check only one)                   |     |
| ••  | EMIZED HEOLII 10  |  | Detailed Summary Page               | X 11a 11b 11c 12<br>13 14 15 16    | 4-7 |
| ۸۰  | w information copied from such Benerte and C  | totomonto mo                               | , not be cold or used by any person |                                    | 17  |
| or  | ly information copied from such Reports and Sifor commercial purposes, other than using the | solicit contributions from such committee. |                                     |                                    |     |
| $\setminus$                                 | NAME OF COMMITTEE (In Full)   |  |                                     |                                    |     |
| $\rangle$                                   | BORDER HEALTH FEDERAL PAC   |  |                                     |                                    |     |
| Α.  | Full Name (Last, First, Middle Initial)<br>Manuel Sanchez                                   |  |                                     | Date of Receipt                    |     |
|   | Mailing Address 2804 Santa Lydia  |  |                                     | 04 12 2007                         |     |
| City  |   | State                                      | Zip Code                            | Transaction ID: SA11A1.6415        |     |
|   | mission   | TX   | 78572                               | Amount of Each Receipt this Period | _   |
|   | FEC ID number of contributing federal political committee.                                  | C  |                                     | 250.00                             |     |
|   | Name of Employer selfemployed   | Occupation physician                       |                                     | contribution                       |     |
|   | Receipt For:  |  | e Year-to-Date ▼                    |                                    |     |
|   | Primary General   |  | 1000.00                             | 1                                  |     |
|   | Other (specify) ▼   | 0 0  | 1000.00                             |                                    |     |
| В.  | Full Name (Last, First, Middle Initial)<br>Manuel Sanchez                                   |  |                                     | Date of Receipt                    |     |
|   | Mailing Address 2804 Santa Lydia  |  |                                     | 05 11 2007                         |     |
| City  |   | State                                      | Zip Code                            | Transaction ID: SA11A1.6537        |     |
|   | mission   | TX   | 78572                               | Amount of Each Receipt this Period |     |
|   | FEC ID number of contributing federal political committee.                                  | C  |                                     | 250.00                             |     |
|   | Name of Employer selfemployed   | Occupation                                 | n                                   | contribution                       |     |
|   | selfemployed  | physician                                  | 1                                   |                                    |     |
|   | Receipt For:  | Aggregate                                  | e Year-to-Date ▼                    |                                    |     |
|   | Primary General Other (specify) ▼   |  | 1250.00                             |                                    |     |
| _   | Full Name (Lost First Middle Letter)  |  |                                     |                                    |     |
| C.  | Full Name (Last, First, Middle Initial)<br>Manuel Sanchez                                   |  |                                     | Date of Receipt                    |     |
|   | Mailing Address 2804 Santa Lydia  |  |                                     | 0 6 1 5 2 0 0 7                    |     |
|   | City  | State                                      | Zip Code                            | Transaction ID: SA11A1.6666        |     |
|   | mission   | TX   | 78572                               | Amount of Each Receipt this Period |     |
|   | FEC ID number of contributing federal political committee.                                  |  |                                     | 250.00                             |     |
| Name of Employer selfemployed  Receipt For: |   | Occupation                                 |                                     | contribution                       |     |
|   |   |  | e Year-to-Date ▼                    |                                    |     |
| Primary General                             |   |  | 1500.00                             | 1                                  |     |
| _   | Other (specify) ▼   |  | 1500.00                             |                                    |     |
| s   | UBTOTAL of Receipts This Page (optional)  |  | <b>.</b>                            | 750.00                             |     |
| $\vdash$                                    | , 0 (1)   |  |                                     |                                    | ٦   |
| T   | OTAL This Period (last page this line number  | only)                                      |                                     |                                    |     |

| SCHEDULE A (FEC Form 3X) |  |                      | Use separate schedule(s)                         | FOR LINE NUMBER: PAGE 107 / 123   |   |
|--------------------------|--|----------------------|--|---|---|
| IT                       | EMIZED RECEIPTS  |                      | or each category of the<br>Detailed Summary Page | (check only one)    X   11a   | 7 |
| Ar                       | ny information copied from such Reports and Sta<br>for commercial purposes, other than using the r | atements may         | not be sold or used by any person                | on for the purpose of soliciting contributions solicit contributions from such committee. |   |
|                          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  |                      |  |   |   |
| A.                       | Full Name (Last, First, Middle Initial)  Michael Seiba  Mailing Address P. O. Box 4556             |                      |  | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                              |   |
|                          | City<br>mcallen  | State<br>TX          | Zip Code<br>78502                                | Transaction ID: SA11A1.6416  Amount of Each Receipt this Period                           |   |
|                          | FEC ID number of contributing federal political committee.   | C                    |  | 250.00  |   |
|                          | Name of Employer selfemployed  | Occupation physiciar | 1  | contribution  |   |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate            | e Year-to-Date ▼<br>1000.00                      |   |   |
| В.                       |  |                      |  | Date of Receipt   |   |
|                          | Mailing Address P. O. Box 4556   |                      |  | 05 11 2007  |   |
|                          | City   | State                | Zip Code   | Transaction ID: SA11A1.6538   |   |
|                          | mcallen  FEC ID number of contributing federal political committee.                                | C                    | 78502  | Amount of Each Receipt this Period  250.00  |   |
|                          | Name of Employer selfemployed  | Occupation physician |  | contribution  |   |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate            | e Year-to-Date ▼<br>1250.00                      |   |   |
| C.                       | Full Name (Last, First, Middle Initial) Michael Seiba Mailing Address P. O. Box 4556               |                      |  | Date of Receipt   |   |
|                          | City   | State                | Zip Code   | 0 6 1 5 2 0 0 7  Transaction ID: SA11A1.6668  |   |
|                          | mcallen  | TX                   | 78502  | Amount of Each Receipt this Period  |   |
|                          | FEC ID number of contributing federal political committee.   | С                    |  | 250.00  |   |
|                          | Name of Employer selfemployed  | Occupation physician | 1  | - contribution  |   |
|                          | Receipt For:  Primary General  Other (specify) ▼   | Aggregate            | e Year-to-Date ▼<br>1500.00                      |   |   |
| s                        | UBTOTAL of Receipts This Page (optional)   |                      |  | 750.00  |   |
| Т                        | OTAL This Period (last page this line number o   | nly)                 |  |   |   |

| SCHEDULE A (FEC Form 3X) |  |  | Use separate schedule(s)          | FOR LINE NUMBER: PAGE 108 / 123             |
|--------------------------|--|--|-----------------------------------|---|
| ITEMIZED RECEIPTS        |  |  | or each category of the           | (check only one)                            |
| •••                      |  |  | Detailed Summary Page             | X   11a   11b   11c   12   15   16   17     |
| Δr                       | y information copied from such Reports and St              | tatements may                                | y not he sold or used by any ners |   |
| or                       | for commercial purposes, other than using the              | o solicit contributions from such committee. |                                   |   |
|                          | NAME OF COMMITTEE (In Full)                                |  |                                   |   |
| $\angle$                 | BORDER HEALTH FEDERAL PAC                                  |  |                                   |   |
| A.                       | Full Name (Last, First, Middle Initial) John Sharp         |  |                                   | Date of Receipt                             |
|                          | Mailing Address P. O.Box 236                               |  |                                   | 04 12 2007                                  |
|                          | City   | State  | Zip Code                          | Transaction ID: SA11A1.6417                 |
|                          | austin   | TX   | 78767                             | Amount of Each Receipt this Period          |
|                          | FEC ID number of contributing federal political committee. | C  |                                   | 250.00                                      |
|                          | Name of Employer self-employed                             | Occupation private in                        |                                   | contribution                                |
|                          | Receipt For:   |  | Year-to-Date ▼                    |   |
|                          | Primary General  | 33 -3  |                                   | 7   |
|                          | Other (specify) ▼  | 0 0  | 1000.00                           |   |
| В.                       | Full Name (Last, First, Middle Initial)<br>John Sharp      |  |                                   | Date of Receipt                             |
|                          | Mailing Address P. O.Box 236                               |  |                                   | 05 11 2007                                  |
| City                     |  | State  | Zip Code                          | Transaction ID: SA11A1.6539                 |
|                          | austin   | TX   | 78767                             | Amount of Each Receipt this Period          |
|                          | FEC ID number of contributing federal political committee. | C  |                                   | 250.00                                      |
|                          | Name of Employer self-employed                             | Occupation private in                        |                                   | contribution                                |
|                          | Receipt For:   | I  | Year-to-Date ▼                    |   |
|                          | Primary General  | 00 0   |                                   | 7   |
|                          | Other (specify) ▼  |  | 1250.00                           |   |
| C.                       | Full Name (Last, First, Middle Initial)<br>John Sharp      | _  |                                   | Date of Receipt                             |
|                          | Mailing Address P. O.Box 236                               |  |                                   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
|                          | City   | State  | Zip Code                          | Transaction ID: SA11A1.6669                 |
|                          | austin   | TX   | 78767                             | Amount of Each Receipt this Period          |
| Name of Employer         |  | C  |                                   | 250.00                                      |
|                          |  | Occupation private in                        |                                   | contribution                                |
|                          |  |  | Year-to-Date ▼                    |   |
| Primary General          |  |  | 1500.00                           | 1   |
|                          | Other (specify) ▼  | 0 0  | 1300.00                           |   |
| s                        | UBTOTAL of Receipts This Page (optional)                   |  |                                   | 750.00                                      |
| H                        |  |  |                                   |   |
| T                        | OTAL This Period (last page this line number of            |  |                                   |   |

## S

|                   | CHEDULE A (FEC Form 3X)   |  |   |   |  |  |
|-------------------|---|--|---|---|--|--|
| ITEMIZED RECEIPTS |   | Use separate schedule(s) or each category of the |   | (check only one)  |  |  |
| 116               | EIMIZED RECEIPTS  |  | Detailed Summary Page   | X 11a 11b 11c 12  |  |  |
|                   |   |  |   | 13 14 15 16 17  |  |  |
| Any<br>or f       | y information copied from such Reports and S or commercial purposes, other than using the | tatements may<br>name and add                    | not be sold or used by any perso<br>lress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |  |  |
| \                 | NAME OF COMMITTEE (In Full)   |  |   |   |  |  |
|                   | BORDER HEALTH FEDERAL PAC   |  |   |   |  |  |
| _                 | Full Name (Last, First, Middle Initial)<br>Tawhid Shuaib                                  |  |   | Date of Receipt   |  |  |
|                   | Mailing Address 4000 Burns Drive  |  |   | 04 12 2007  |  |  |
|                   | City  | State  | Zip Code  | Transaction ID: SA11A1.6418   |  |  |
|                   | mcallen   | TX   | 78503   | Amount of Each Receipt this Period  |  |  |
|                   | FEC ID number of contributing federal political committee.                                | C  |   | 250.00  |  |  |
| •                 | Name of Employer<br>selfemployed  | Occupation physician                             |   | contribution  |  |  |
|                   | Receipt For: Primary General Other (specify)  | Aggregate  | Year-to-Date ▼ 1000.00  | 1   |  |  |
|                   | Full Name (Last, First, Middle Initial)   | 0 0  | 0 0 0 0 0 0 0   | 1   |  |  |
| _                 | Tawhid Shuaib   |  |   | Date of Receipt   |  |  |
|                   | Mailing Address 4000 Burns Drive  |  |   | 05 11 YYYYY<br>11 2007  |  |  |
|                   | City  | State  | Zip Code  | Transaction ID: SA11A1.6540   |  |  |
|                   | mcallen   | TX   | 78503   | Amount of Each Receipt this Period  |  |  |
|                   | FEC ID number of contributing federal political committee.                                | C  |   | 250.00  |  |  |
|                   | Name of Employer<br>selfemployed  | Occupation physician                             |   | contribution  |  |  |
|                   | Receipt For:  | Aggregate  | Year-to-Date ▼  |   |  |  |
|                   | Primary General Other (specify) ▼   |  | 1250.00   |   |  |  |
|                   | Full Name (Last, First, Middle Initial)<br>Tawhid Shuaib                                  | l  |   | Date of Receipt   |  |  |
|                   | Mailing Address 4000 Burns Drive  |  |   | 06 15 2007  |  |  |
|                   | City  | State  | Zip Code  | Transaction ID: SA11A1.6670   |  |  |
|                   | mcallen   | TX   | 78503   | Amount of Each Receipt this Period  |  |  |
|                   | FEC ID number of contributing federal political committee.                                | C  |   | 250.00  |  |  |
| •                 | Name of Employer<br>selfemployed  | Occupation physician                             |   | contribution  |  |  |
|                   | Receipt For:  | Aggregate  | Year-to-Date ▼  |   |  |  |
|                   | Primary General Other (specify) ▼   | 0 0  | 1500.00   |   |  |  |
| SL                | JBTOTAL of Receipts This Page (optional)  |  | <b>)</b>  | 750.00  |  |  |

TOTAL This Period (last page this line number only) .....

| SCHEDULE A (FEC Form 3X) |  |                       | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 110 / 123              |
|--------------------------|--|-----------------------|-------------------------------------|--|
|                          | EMIZED RECEIPTS  |                       | or each category of the             | (check only one)                             |
| •••                      |  |                       | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17      |
| Δr                       | y information copied from such Reports and Si              | tatements may         | y not he sold or used by any ners   |  |
| or                       | for commercial purposes, other than using the              | name and add          | dress of any political committee to | o solicit contributions from such committee. |
|                          | NAME OF COMMITTEE (In Full)                                |                       |                                     |  |
| $\angle$                 | BORDER HEALTH FEDERAL PAC                                  |                       |                                     |  |
| A.                       | Full Name (Last, First, Middle Initial)<br>Jose Trejo      |                       |                                     | Date of Receipt                              |
|                          | Mailing Address 112 S. Broadway                            |                       |                                     | 04 / 12 / Y Y Y Y Y Y Y                      |
|                          | City   | State                 | Zip Code                            | Transaction ID: SA11A1.6419                  |
|                          | mcallen  | TX                    | 78501                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing federal political committee. | C                     |                                     | 250.00                                       |
|                          | Name of Employer self-employed                             | Occupation private in |                                     | contribution                                 |
|                          | Receipt For:   |                       | Year-to-Date ▼                      |  |
|                          | Primary General  |                       | 1000.00                             | 7  |
|                          | Other (specify) ▼  |                       | 1000.00                             |  |
| В.                       | Full Name (Last, First, Middle Initial)<br>Jose Trejo      |                       |                                     | Date of Receipt                              |
|                          | Mailing Address 112 S. Broadway                            |                       |                                     | 05 11 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y    |
|                          | City   | State                 | Zip Code                            | Transaction ID: SA11A1.6541                  |
|                          | mcallen  | TX                    | 78501                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing federal political committee. | С                     |                                     | 250.00                                       |
|                          | Name of Employer self-employed                             | Occupation            |                                     | contribution                                 |
|                          |  | private in            |                                     |  |
|                          | Receipt For:  Primary  General                             | Aggregate             | e Year-to-Date ▼                    | -  |
|                          | Other (specify) ▼  |                       | 1250.00                             |  |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Jose Trejo         |                       |                                     | Date of Receipt                              |
|                          | Mailing Address 112 S. Broadway                            |                       |                                     | 0 6 1 5 2 0 0 7                              |
|                          | City   | State                 | Zip Code                            | Transaction ID: SA11A1.6671                  |
|                          | mcallen  | TX                    | 78501                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing federal political committee. | C                     |                                     | 250.00                                       |
|                          | Name of Employer self-employed                             |                       | n<br>vestor                         | contribution                                 |
|                          | Receipt For:   |                       | Year-to-Date ▼                      |  |
|                          | Primary General  |                       | 1500.00                             | 7  |
|                          | Other (specify) ▼  | 0 0                   | 1500.00                             |  |
| s                        | UBTOTAL of Receipts This Page (optional)                   |                       |                                     | 750.00                                       |
| H                        |  |                       |                                     |  |
| T                        | OTAL This Period (last page this line number of            | only)                 |                                     |  |

| S                 | CHEDULE A (FEC Form 3X)  |   | Use separate schedule(s)              | FOR LINE NUMBER: PAGE 111 / 123  |
|-------------------|--|---|---------------------------------------|--|
| ITEMIZED RECEIPTS |  | or each category of the                     |                                       | (check only one)   |
| ••                |  |   | Detailed Summary Page                 | X   11a   11b   11c   12   15   16   17  |
| Δr                | w information copied from such Reports and S   | tatemente may                               | y not be sold or used by any ners     |  |
| or                | y information copied from such Reports and S<br>for commercial purposes, other than using the  | name and add                                | dress of any political committee to   | o solicit contributions from such committee.   |
| $\setminus$       | NAME OF COMMITTEE (In Full)  |   |                                       |  |
|                   | BORDER HEALTH FEDERAL PAC  |   |                                       |  |
| A.                | Full Name (Last, First, Middle Initial)<br>Juan Trevino  |   |                                       | Date of Receipt  |
|                   | Mailing Address 205 E. Toronto   |   |                                       | 05 11 7 2007   |
|                   | City   | State                                       | Zip Code                              | Transaction ID: SA11A1.6544  |
|                   | mcallen  | TX  | 78501                                 | Amount of Each Receipt this Period   |
|                   | FEC ID number of contributing federal political committee.   | C   |                                       | 50.00  |
|                   | Name of Employer selfemployed  | Occupation physician                        |                                       | contrbution  |
|                   | Receipt For:   |   | Year-to-Date ▼                        |  |
|                   | Primary General  |   | 250.00                                | 7  |
|                   | Other (specify) ▼  | 0 0   | 230.00                                |  |
| В.                | Full Name (Last, First, Middle Initial)<br>Juan Trevino  |   |                                       | Date of Receipt  |
|                   | Mailing Address 205 E. Toronto   |   |                                       | 06 15 7 2007   |
|                   | City   | State                                       | Zip Code                              | Transaction ID: SA11A1.6672  |
|                   | mcallen  | TX  | 78501                                 | Amount of Each Receipt this Period   |
|                   | FEC ID number of contributing federal political committee.   | C   |                                       | 50.00  |
|                   |  |   |                                       | contribution   |
|                   | Name of Employer selfemployed  | Occupation physician                        |                                       |  |
|                   | Receipt For:   | physiciar                                   |                                       |  |
|                   | selfemployed   | physiciar                                   | 1                                     |  |
|                   | Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial)  | physiciar                                   | e Year-to-Date ▼                      | Date of Receipt  |
| C.                | Receipt For: Primary General Other (specify)   | physiciar                                   | e Year-to-Date ▼                      | Date of Receipt  0 4   |
| <br>C.            | Receipt For:  Primary General Other (specify)   Full Name (Last, First, Middle Initial) Susan Turley   | physiciar                                   | e Year-to-Date ▼                      | M M / D D / Y Y Y Y  |
| <br>c.            | Receipt For:  Primary General Other (specify)   Full Name (Last, First, Middle Initial) Susan Turley Mailing Address 312 Thunderbird   | physician<br>Aggregate                      | Year-to-Date ▼ 300.00                 | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| <br>C.            | Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Susan Turley Mailing Address 312 Thunderbird City  | physiciar<br>Aggregate<br>State             | Year-to-Date ▼  300.00  Zip Code      | Transaction ID: SA11A1.6421  Amount of Each Receipt this Period  250.00              |
| C.                | Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Susan Turley Mailing Address 312 Thunderbird City mcallen FEC ID number of contributing  | physiciar Aggregate State TX                | Zip Code 78504                        | Transaction ID: SA11A1.6421  Amount of Each Receipt this Period                      |
| <br>c.            | Receipt For:  Primary General Other (specify)  Full Name (Last, First, Middle Initial) Susan Turley Mailing Address 312 Thunderbird  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer self-employed  Receipt For:  | State TX  C  Occupation physician           | Zip Code 78504                        | Transaction ID: SA11A1.6421  Amount of Each Receipt this Period  250.00              |
| c.                | Receipt For:  Primary General Other (specify)   Full Name (Last, First, Middle Initial) Susan Turley Mailing Address 312 Thunderbird  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer self-employed   | State TX  C  Occupation physician           | Zip Code 78504                        | Transaction ID: SA11A1.6421  Amount of Each Receipt this Period  250.00              |
|                   | Receipt For:  Primary General Other (specify)   Full Name (Last, First, Middle Initial) Susan Turley Mailing Address 312 Thunderbird  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer self-employed  Receipt For: Primary General Other (specify)   Other (specify) | State TX  C  Occupation physician Aggregate | Zip Code 78504  Year-to-Date  1000.00 | Transaction ID: SA11A1.6421  Amount of Each Receipt this Period  250.00              |
| s                 | Receipt For:  Primary General Other (specify)   Full Name (Last, First, Middle Initial) Susan Turley Mailing Address 312 Thunderbird  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer self-employed  Receipt For: Primary General                                   | State TX  C  Occupation physician Aggregate | Zip Code 78504  1 000.00              | Transaction ID: SA11A1.6421 Amount of Each Receipt this Period  250.00  contribution |

| SCHEDULE A (FEC Form 3X) |  |  | Use separate schedule(s)        | FOR LINE NUMBER: PAGE 112 / 123             |
|--------------------------|--|--|---------------------------------|---|
| ITEMIZED RECEIPTS        |  | or each category of the                      |                                 | (check only one)                            |
| ••                       |  |  | Detailed Summary Page           | X   11a   11b   11c   12   15   16   17     |
| An                       | v information copied from such Reports and St  | atements may                                 | not be sold or used by any pers |   |
| or                       | y information copied from such Reports and St<br>for commercial purposes, other than using the | o solicit contributions from such committee. |                                 |   |
| $\setminus$              | NAME OF COMMITTEE (In Full)  |  |                                 |   |
|                          | BORDER HEALTH FEDERAL PAC  |  |                                 |   |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Susan Turley  |  |                                 | Date of Receipt                             |
|                          | Mailing Address 312 Thunderbird  |  |                                 | 05 11 2007                                  |
|                          | City   | State  | Zip Code                        | Transaction ID: SA11A1.6545                 |
|                          | mcallen  | TX   | 78504                           | Amount of Each Receipt this Period          |
|                          | FEC ID number of contributing federal political committee.                                     | C  |                                 | 250.00                                      |
|                          | Name of Employer self-employed   | Occupation                                   |                                 | contrbution                                 |
|                          |  | physician                                    |                                 | _   |
|                          | Receipt For: Primary General   | Aggregate                                    | Year-to-Date ▼                  | 7   |
|                          | Other (specify) ▼  | 1  | 1250.00                         |   |
|                          |  |  |                                 |   |
| В.                       | Full Name (Last, First, Middle Initial)<br>Susan Turley  |  |                                 | Date of Receipt                             |
|                          | Mailing Address 312 Thunderbird  |  |                                 | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
|                          | City   | State  | Zip Code                        | Transaction ID: SA11A1.6673                 |
|                          | mcallen  | TX   | 78504                           | Amount of Each Receipt this Period          |
|                          | FEC ID number of contributing federal political committee.                                     | C  |                                 | 250.00                                      |
|                          | Name of Employer self-employed   | Occupation                                   |                                 | contribution                                |
|                          | Receipt For:   | physician                                    | Year-to-Date ▼                  | _   |
|                          | Primary General  | Aggregate                                    | rear-to-Date V                  | 7   |
|                          | Other (specify) ▼  |  | 1500.00                         |   |
| <u>с.</u>                | Full Name (Last, First, Middle Initial) Marcel Twahirwa  |  |                                 | Date of Receipt                             |
|                          | Mailing Address 2403 El Encino Drive   |  |                                 | 0 4 1 2 2 0 0 7                             |
|                          | City   | State  | Zip Code                        | Transaction ID: SA11A1.6422                 |
|                          | mission  | TX   | 78572                           | Amount of Each Receipt this Period          |
|                          | FEC ID number of contributing federal political committee.                                     | C  |                                 | 250.00                                      |
|                          | Name of Employer selfemployed  |  | 1                               | contribution                                |
|                          | Receipt For:   | physician<br>Aggregate                       | Year-to-Date ▼                  | 1   |
|                          | Primary General  |  | 1000.00                         | 1   |
|                          | Other (specify)  | 0 0  | 1000.00                         |   |
| s                        | UBTOTAL of Receipts This Page (optional)   |  |                                 | 750.00                                      |
| $\vdash$                 | dgo (optional)   |  |                                 |   |
| T                        | OTAL This Period (last page this line number of  |  |                                 |   |

|             | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS   |  | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 113 / 123   (check only one)     X   11a   11b   11c   12 |
|-------------|---|--|--|---|
|             | information and of the control Department and Ot  |  | , ,  | 13 14 15 16 17  |
| or          | ny information copied from such Reports and St<br>for commercial purposes, other than using the | name and add                                 | dress of any political committee to                                    | o solicit contributions from such committee.                                    |
| $\setminus$ | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |  |  |   |
| Α.          | Full Name (Last, First, Middle Initial)<br>Marcel Twahirwa                                      |  |  | Date of Receipt   |
|             | Mailing Address 2403 El Encino Drive  |  |  | 05 11 2007  |
|             | City<br>mission   | State<br>TX                                  | Zip Code<br>78572  | Transaction ID: SA11A1.6546  Amount of Each Receipt this Period                 |
|             | FEC ID number of contributing federal political committee.                                      | C  |  | 250.00  |
|             | Name of Employer selfemployed   | Occupation physiciar                         |  | contrbution   |
|             | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                                    | e Year-to-Date ▼<br>1250.00  |   |
| В.          |   |  |  | Date of Receipt   |
|             | Mailing Address 2403 El Encino Drive  |  |  | 06 15 2007  |
|             | City  | State<br>TX                                  | Zip Code   | Transaction ID: SA11A1.6674   |
|             | mission  FEC ID number of contributing federal political committee.                             | C  | 78572  | Amount of Each Receipt this Period  250.00                                      |
|             | Name of Employer selfemployed   | Occupation physiciar                         |  | - contribution  |
|             | Receipt For:  Primary General  Other (specify) ▼  | Aggregate                                    | e Year-to-Date ▼<br>1500.00  |   |
| <u> </u>    | Full Name (Last, First, Middle Initial) Jose Vasquez  |  |  | Date of Receipt   |
|             | Mailing Address 2548 Palm Circle  |  |  | 04 12 2007  |
|             | City rio grande city  | State<br>TX                                  | Zip Code<br>78582  | Transaction ID: SA11A1.6423  Amount of Each Receipt this Period                 |
|             | FEC ID number of contributing federal political committee.                                      | C  |  | 250.00  |
|             | Name of Employer selfemployed   | Occupation                                   |  | contribution  |
|             | Receipt For:  Primary General  Other (specify) ▼  | For: Aggregate Year-to-Date ▼ rimary General |  |   |
| s           | UBTOTAL of Receipts This Page (optional)  |  |  | 750.00  |
| $\vdash$    | OTAL This Period (last nage this line number of   |  |  |   |

| SCHEDULE A (FEC Form 3X) |  |                      | Llas sanarata sabadula(s)           |                                    | GE 114 / 123      |
|--------------------------|--|----------------------|-------------------------------------|------------------------------------|-------------------|
| ITEMIZED RECEIPTS        |  |                      | or each category of the             | (check only one)                   | <b>—</b>          |
| ••                       |  |                      | Detailed Summary Page               | X 11a 11b 11c                      | $\rightarrow$ $-$ |
| Δ.                       | winformation assign from auch Bonarta and St   | estamenta mai        | , not be cold or used by any person |                                    |                   |
| or                       | y information copied from such Reports and St<br>for commercial purposes, other than using the | name and add         | dress of any political committee to | solicit contributions from such of | committee.        |
|                          | NAME OF COMMITTEE (In Full)  |                      |                                     |                                    |                   |
| $\rangle$                | BORDER HEALTH FEDERAL PAC  |                      |                                     |                                    |                   |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Jose Vasquez  |                      |                                     | Date of Receipt                    |                   |
|                          | Mailing Address 2548 Palm Circle   |                      |                                     | 0 5                                | 2007              |
|                          | City   | State                | Zip Code                            | Transaction ID: SA11A              |                   |
|                          | rio grande city  | TX                   | 78582                               | Amount of Each Receipt t           | his Period        |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |                                     |                                    | 250.00            |
|                          | Name of Employer selfemployed  | Occupation physician |                                     | - contrbution                      |                   |
|                          | Receipt For:   |                      | e Year-to-Date ▼                    |                                    |                   |
|                          | Primary General  |                      | 1050.00                             | 1                                  |                   |
|                          | Other (specify) ▼  | 0 0                  | 1250.00                             |                                    |                   |
| В.                       | Full Name (Last, First, Middle Initial)<br>Jose Vasquez  |                      |                                     | Date of Receipt                    |                   |
|                          | Mailing Address 2548 Palm Circle   |                      |                                     | 0 6 1 5 / Y                        | 2007              |
|                          | City   | State                | Zip Code                            | Transaction ID: SA11A              | 1.6675            |
|                          | rio grande city  | TX                   | 78582                               | Amount of Each Receipt t           | his Period        |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |                                     |                                    | 250.00            |
|                          | Name of Employer selfemployed  | Occupation           | n                                   | contribution                       |                   |
|                          | selfemployed   | physiciar            | 1                                   |                                    |                   |
|                          | Receipt For:   | Aggregate            | e Year-to-Date ▼                    |                                    |                   |
|                          | Primary General  |                      | 1500.00                             |                                    |                   |
|                          | Other (specify) ▼  | 0 0                  |                                     |                                    |                   |
| C.                       | Full Name (Last, First, Middle Initial)<br>Ramiro Verdoreen                                    |                      |                                     | Date of Receipt                    |                   |
|                          | Mailing Address 301 E. Newport   |                      |                                     | M M / D D / Y 0 4 12               | 2007              |
|                          | City   | State                | Zip Code                            | Transaction ID: SA11A              | 1.6424            |
|                          | mcallen  | TX                   | 78501                               | Amount of Each Receipt t           | his Period        |
|                          | FEC ID number of contributing federal political committee.                                     | C                    |                                     |                                    | 250.00            |
|                          | Name of Employer selfemployed  | Occupation physician |                                     | - contribution                     |                   |
|                          | Receipt For:   |                      | e Year-to-Date ▼                    |                                    |                   |
|                          | Primary General  |                      | 1000.00                             | 1                                  |                   |
|                          | Other (specify) ▼  | 0 0                  | 1000.00                             |                                    |                   |
| s                        | UBTOTAL of Receipts This Page (optional)   |                      |                                     |                                    | 750.00            |
| $\vdash$                 | . 5 ,  |                      |                                     |                                    |                   |
| т                        | OTAL This Period (last page this line number of  | only)                |                                     |                                    |                   |

| SCHEDULE A (FEC Form 3X) |  |                      | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 115 / 123                                 |
|--------------------------|--|----------------------|-------------------------------------|---|
| ITEMIZED RECEIPTS        |  |                      | or each category of the             | (check only one)  |
| ••                       |  |                      | Detailed Summary Page               | X   11a   11b   11c   12   13   14   15   16   17               |
| An                       | y information copied from such Reports and St              | atements may         | not be sold or used by any pers     |   |
| or                       | for commercial purposes, other than using the              | name and add         | dress of any political committee to | o solicit contributions from such committee.                    |
| $\setminus$              | NAME OF COMMITTEE (In Full)                                |                      |                                     |   |
| $ \rangle$               | BORDER HEALTH FEDERAL PAC                                  |                      |                                     |   |
| _                        | Full Name (Last, First, Middle Initial)                    |                      |                                     |   |
| A.                       | Ramiro Verdoreen   |                      |                                     | Date of Receipt   |
|                          | Mailing Address 301 E. Newport                             |                      |                                     | M M / D D / Y Y Y Y   |
|                          | City   | State                | Zip Code                            | 05 11 2007  |
|                          | mcallen  | TX                   | 78501                               | Transaction ID: SA11A1.6548  Amount of Each Receipt this Period |
|                          | FEC ID number of contributing                              |                      | 7000.                               |   |
|                          | federal political committee.                               | С                    |                                     | 250.00  |
|                          | Name of Employer   | Occupation           | 1                                   | contrbution   |
|                          | Name of Employer selfemployed                              | physician            |                                     |   |
|                          | Receipt For:   | Aggregate            | Year-to-Date ▼                      |   |
|                          | Primary General  |                      | 1250.00                             | 7   |
|                          | Other (specify)  |                      | 12000                               |   |
| _                        | Full Name (Last, First, Middle Initial)                    |                      |                                     |   |
| В.                       | Ramiro Verdoreen   |                      |                                     | Date of Receipt   |
|                          | Mailing Address 301 E. Newport                             |                      |                                     | 0 6 1 5 2 0 0 7   |
|                          | City   | State                | Zip Code                            | Transaction ID: SA11A1.6676                                     |
|                          | mcallen  | TX                   | 78501                               | Amount of Each Receipt this Period                              |
|                          | FEC ID number of contributing                              |                      | 1 1 1 1                             | 250.00  |
|                          | federal political committee.                               | C                    |                                     |   |
|                          | Name of Employer   | Occupation           | 1                                   | contribution  |
|                          | selfemployed   | physician            | l                                   |   |
|                          | Receipt For:   | Aggregate            | Year-to-Date ▼                      |   |
|                          | Primary General Other (specify)                            |                      | 1500.00                             |   |
|                          | Cuter (openity)  | 0 0                  |                                     | -   |
| _                        | Full Name (Last, First, Middle Initial)                    |                      |                                     |   |
| C.                       | Carlos Villalta  Mailing Address P. O. Box 1632            |                      |                                     | Date of Receipt   |
|                          | Walling Addicess F. O. Box 1652                            |                      |                                     | 04 12 2007  |
|                          | City   | State                | Zip Code                            | Transaction ID: SA11A1.6425                                     |
|                          | mission  | TX                   | 78573                               | Amount of Each Receipt this Period                              |
|                          | FEC ID number of contributing federal political committee. | С                    |                                     | 125.00  |
|                          | Tederal political committee.                               |                      |                                     | contribution  |
|                          | Name of Employer selfemployed                              | Occupation physician |                                     | Contribution  |
|                          | pr   |                      | Year-to-Date ▼                      | $\dashv$  |
|                          |  |                      |                                     | 1   |
| Other (specify)          |  |                      | 500.00                              |   |
|                          |  |                      |                                     |   |
|                          | UPTOTAL of Descripto This Daws (anti-call)                 |                      |                                     | 625.00  |
| L                        | UBTOTAL of Receipts This Page (optional)                   |                      |                                     |   |
| T                        | OTAL This Period (last page this line number of            | only)                | <b>.</b>                            |   |

| SCHEDULE A (FEC Form 3X) |  | Use separate schedule(s)     | FOR LINE NUMBER: PAGE 116 / 123   |   |   |  |
|--------------------------|--|------------------------------|---|---|---|--|
|                          | EMIZED RECEIPTS  |                              | or each category of the  Detailed Summary Page                          | (check only one)  X 11a 11b 11c 12  |   |  |
|                          |  |                              |   | 13 14 15 16 17  | 7 |  |
| Ar                       | ny information copied from such Reports and Sta<br>for commercial purposes, other than using the r | atements may<br>name and add | not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |   |  |
|                          | NAME OF COMMITTEE (In Full)  |                              | , , , , , , , , , , , , , , , , , , ,                                   |   | _ |  |
| $\rangle$                | BORDER HEALTH FEDERAL PAC  |                              |   |   |   |  |
| A.                       | Full Name (Last, First, Middle Initial) Carlos Villalta  |                              |   | Date of Receipt   |   |  |
|                          | Mailing Address P. O. Box 1632   |                              |   | 05 11 7 2007  |   |  |
|                          | City   | State                        | Zip Code  | Transaction ID: SA11A1.6549   |   |  |
|                          | mission  | TX                           | 78573   | Amount of Each Receipt this Period  |   |  |
|                          | FEC ID number of contributing federal political committee.   | C                            |   | 125.00  |   |  |
|                          | Name of Employer selfemployed  | Occupation physician         |   | contrbution   |   |  |
|                          | Receipt For:   | Aggregate                    | e Year-to-Date ▼  |   |   |  |
|                          | Primary General Other (specify) ▼  |                              | 625.00  |   |   |  |
| —<br>В.                  | Full Name (Last, First, Middle Initial) Carlos Villalta  |                              |   | Date of Receipt   | _ |  |
|                          | Mailing Address P. O. Box 1632   |                              |   | 0 6 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |   |  |
|                          | City   | State                        | Zip Code  | Transaction ID: SA11A1.6677   |   |  |
|                          | mission  | TX                           | 78573   | Amount of Each Receipt this Period  |   |  |
|                          | FEC ID number of contributing federal political committee.   | С                            |   | 125.00  |   |  |
|                          | Name of Employer selfemployed  | Occupation physician         |   | contribution  |   |  |
|                          | Receipt For:   | ,· ·                         | e Year-to-Date ▼  |   |   |  |
|                          | Primary General Other (specify) ▼  |                              | 750.00  |   |   |  |
| <u> </u>                 | Full Name (Last, First, Middle Initial) Rita Villanueva  |                              |   | Date of Receipt   | _ |  |
|                          | Mailing Address 801 E. Nolana Suite 4  |                              |   | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y   |   |  |
|                          | City   | State                        | Zip Code  | Transaction ID: SA11A1.6426   |   |  |
|                          | mcallen  | TX                           | 78504   | Amount of Each Receipt this Period  |   |  |
|                          | FEC ID number of contributing federal political committee.   | С                            |   | 179.31  |   |  |
|                          | Name of Employer selfemployed  | Occupation physician         |   | contribution  |   |  |
|                          | Receipt For:   | Aggregate                    | e Year-to-Date ▼  |   |   |  |
|                          | Primary General Other (specify) ▼  |                              | 661.61  |   |   |  |
| s                        | UBTOTAL of Receipts This Page (optional)   |                              |   | 429.31  | _ |  |
| T                        | TOTAL This Period (last page this line number only)  |                              |   |   |   |  |

## S

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  | Use separate schedule(s) or each category of the Detailed Summary Page                         | FOR LINE NUMBER: PAGE 117 / 123 (check only one)  X 11a 11b 11c 12  |
|---|--|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the   | Statements may not be sold or used by any per<br>e name and address of any political committee | son for the purpose of soliciting contributions to solicit contributions from such committee.                                 |
| NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC   |  |   |
| Full Name (Last, First, Middle Initial)  A. Rita Villanueva  Mailing Address 801 E. Nolana Suite 4  City  mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General Other (specify) | State Zip Code TX 78504  C  Occupation physician  Aggregate Year-to-Date ▼                     | Date of Receipt    M M  |
| Full Name (Last, First, Middle Initial) Rita Villanueva  Mailing Address 801 E. Nolana Suite 4  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For: Primary General Other (specify)       | State Zip Code TX 78504  C  Occupation physician  Aggregate Year-to-Date ▼                     | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| Full Name (Last, First, Middle Initial)  C. Victor Villarreal  Mailing Address 901 W. Moore  City pharr  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For: Primary General Other (specify)            | State Zip Code TX 78577  C  Occupation physician  Aggregate Year-to-Date ▼  540.90             | Date of Receipt  M M J D D J Z 2 0 0 7  Transaction ID: SA11A1.6427  Amount of Each Receipt this Period  146.60  contribution |
| SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number  |  | 489.02  |

| SCHEDULE A (FEC Form 3X) |  |                      | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 118 / 123              |
|--------------------------|--|----------------------|-------------------------------------|--|
|                          | EMIZED RECEIPTS  |                      | or each category of the             | (check only one)                             |
| •••                      |  |                      | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17      |
| Δr                       | y information copied from such Reports and St                | atements may         | y not he sold or used by any ners   |  |
| or                       | for commercial purposes, other than using the                | name and ado         | dress of any political committee to | o solicit contributions from such committee. |
| $\setminus$              | NAME OF COMMITTEE (In Full)                                  |                      |                                     |  |
|                          | BORDER HEALTH FEDERAL PAC                                    |                      |                                     |  |
| Α.                       | Full Name (Last, First, Middle Initial) Victor Villarreal    |                      |                                     | Date of Receipt                              |
|                          | Mailing Address 901 W. Moore                                 |                      |                                     | 05 11 7 2007                                 |
|                          | City   | State                | Zip Code                            | Transaction ID: SA11A1.6551                  |
|                          | pharr  | TX                   | 78577                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing federal political committee.   | C                    |                                     | 154.69                                       |
|                          | Name of Employer selfemployed                                | Occupation physician |                                     | contrbution                                  |
|                          | Receipt For:   | 1                    | Year-to-Date ▼                      |  |
|                          | Primary General  |                      | 005.50                              | 1  |
|                          | Other (specify) ▼  | 0 0                  | 695.59                              |  |
| В.                       | Full Name (Last, First, Middle Initial)<br>Victor Villarreal |                      |                                     | Date of Receipt                              |
|                          | Mailing Address 901 W. Moore                                 |                      |                                     | 06 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y    |
|                          | City   | State                | Zip Code                            | Transaction ID: SA11A1.6679                  |
|                          | pharr  | TX                   | 78577                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing federal political committee.   | C                    |                                     | 125.26                                       |
|                          | Name of Employer selfemployed                                | Occupation physician |                                     | contribution                                 |
|                          | Receipt For:   | +' -                 | Year-to-Date ▼                      |  |
|                          | Primary General  |                      | 820.85                              | 1  |
|                          | Other (specify)  | 0 0                  | 820.63                              |  |
| C.                       | Full Name (Last, First, Middle Initial)<br>Raymond Walker    |                      |                                     | Date of Receipt                              |
|                          | Mailing Address 1117 Shallow apt 4                           |                      |                                     | 04 12 2007                                   |
|                          | City   | State                | Zip Code                            | Transaction ID: SA11A1.6428                  |
|                          | mcallen  | TX                   | 78504                               | Amount of Each Receipt this Period           |
|                          | FEC ID number of contributing federal political committee.   | C                    |                                     | 250.00                                       |
|                          | Receipt For:  Primary  General  Ag                           |                      | vestor                              | contribution                                 |
|                          |  |                      | Year-to-Date ▼                      |  |
|                          |  |                      | 1000.00                             | 7  |
|                          | Other (specify) ▼  | 0 0                  | 1000.00                             |  |
| s                        | UBTOTAL of Receipts This Page (optional)                     |                      |                                     | 529.95                                       |
| $\vdash$                 | <u> </u>   |                      |                                     |  |
| T                        | OTAL This Period (last page this line number of              | only)                |                                     |  |

| SCHEDULE A (FEC Form 3X) |  | Use separate schedule(s)                     | FOR LINE NUMBER: PAGE 119 / 123               |  |
|--------------------------|--|--|---|--|
|                          | EMIZED RECEIPTS  |  | or each category of the Detailed Summary Page | (check only one)    X   11a                                    |
| Ar                       | ny information copied from such Reports and S for commercial purposes, other than using the  | tatements may                                | y not be sold or used by any perso            | on for the purpose of soliciting contributions                 |
|                          | NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC  | Traine and date                              | arooo or any ponioca committee to             | CONTRACTOR TO THE CONTRACTOR CONTRACTOR                        |
| Α.                       | Full Name (Last, First, Middle Initial) Raymond Walker  Mailing Address 1117 Shallow apt 4  City mcallen  FEC ID number of contributing federal political committee.   | State<br>TX                                  | Zip Code<br>78504                             | Date of Receipt    M M   |
|                          | Name of Employer self-employed  Receipt For:  Primary General  Other (specify) ▼   | Occupation private in Aggregate              |   |  |
| B.                       | Full Name (Last, First, Middle Initial) Raymond Walker  Mailing Address 1117 Shallow apt 4  City mcallen  FEC ID number of contributing federal political committee.  Name of Employer self-employed  Receipt For: Primary General | State TX  C  Occupation private in Aggregate |   | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| <b>C</b> .               | Other (specify)  Full Name (Last, First, Middle Initial) James Webb Mailing Address 312 Redbud  City mcallen   | State<br>TX                                  | Zip Code<br>78504                             | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
|                          | FEC ID number of contributing federal political committee.  Name of Employer self-employed  Receipt For:  Primary General Other (specify)  | Occupation private in Aggregate              |   | contribution   |
| s                        | UBTOTAL of Receipts This Page (optional)   |  |   | 616.36   |
| т                        | OTAL This Period (last page this line number   | only)  |   |  |

| S          | CHEDULE A (FEC Form 3X)  |                       |  | FOR LINE NUMBER: PAGE 120 / 123                |
|------------|--|-----------------------|--|--|
|            | •  |                       | Use separate schedule(s) or each category of the | (check only one)                               |
| П          | EMIZED RECEIPTS  |                       | Detailed Summary Page                            | X 11a 11b 11c 12                               |
|            |  |                       |  | 13 14 15 16 17                                 |
| Ar         | y information copied from such Reports and Sta   | atements may          | not be sold or used by any pers                  | on for the purpose of soliciting contributions |
| or         | for commercial purposes, other than using the  | name and add          | dress of any political committee to              | o solicit contributions from such committee.   |
|            | NAME OF COMMITTEE (In Full)  |                       |  |  |
| $ \rangle$ | BORDER HEALTH FEDERAL PAC  |                       |  |  |
|            | Full Name of Local First Addalla Latitals  |                       |  |  |
| Α.         | Full Name (Last, First, Middle Initial) James Webb   |                       |  | Date of Receipt                                |
| ۸.         | Mailing Address 312 Redbud   |                       |  | M M / D D / Y Y Y Y                            |
|            | The state of the s |                       |  | 05 11 2007                                     |
|            | City   | State                 | Zip Code   | Transaction ID: SA11A1.6555                    |
|            | mcallen  | TX                    | 78504  | Amount of Each Receipt this Period             |
|            | FEC ID number of contributing  |                       |  | 100.70   |
|            | federal political committee.   | C                     |  | 122.78   |
|            | Name of Canalana   | 10                    | _  | contrbution                                    |
|            | Name of Employer self-employed   | Occupation private in |  |  |
|            | Receipt For:   |                       | e Year-to-Date ▼                                 | _  |
|            | Primary General  | riggregate            | Tour to Bate ¥                                   |  |
|            | Other (specify) ▼  |                       | 552.11   |  |
|            |  |                       |  | _  |
|            | Full Name (Last, First, Middle Initial)  |                       |  |  |
| В.         | James Webb   |                       |  | Date of Receipt                                |
|            | Mailing Address 312 Redbud   |                       |  | 0 6 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y    |
|            | City   | Ctata                 | Zin Codo   |  |
|            | City   | State<br>TX           | Zip Code   | Transaction ID: SA11A1.6681                    |
|            | mcallen  | 1/                    | 78504  | Amount of Each Receipt this Period             |
|            | FEC ID number of contributing federal political committee.   | C                     |  | 99.42  |
|            | Toderai politicai committee.   |                       |  | contribution                                   |
|            | Name of Employer self-employed   | Occupation            | n  | Continuation                                   |
|            | · · · · · · · · · · · · · · · · · · ·  | private in            |  |  |
|            | Receipt For:   | Aggregate             | e Year-to-Date ▼                                 |  |
|            | Primary General  |                       | 651.53   |  |
|            | Other (specify)  | 0 0                   |  | _  |
|            | Full Name (Last, First, Middle Initial)  |                       |  | +  |
| C.         | Patrick Wilcox   |                       |  | Date of Receipt                                |
|            | Mailing Address 111 Rio Grande   |                       |  | M M / D D / Y Y Y Y                            |
|            |  |                       |  | 04 12 2007                                     |
|            | City   | State                 | Zip Code   | Transaction ID: SA11A1.6430                    |
|            | mission  | TX                    | 78572  | Amount of Each Receipt this Period             |
|            | FEC ID number of contributing  | С                     |  | 250.00   |
|            | federal political committee.   |                       |  |  |
|            | Name of Employer   | Occupation            | n  | contribution                                   |
|            | selfemployed   | physician             | 1  |  |
|            |  |                       | e Year-to-Date ▼                                 |  |
|            | Primary General  |                       | 1000.00  | 7  |
|            | Other (specify)  | 0 0                   | 1000.00  | <b>⅃</b> ┃                                     |
| _          |  |                       |  |  |
| _          |  |                       |  | 472.20   |
| Ls         | UBTOTAL of Receipts This Page (optional)   |                       |  |  |
| _          | OTAL This Davied (last access this Park access   | l. A                  | ,  |  |
| 1 1        | OTAL This Period (last page this line number of  | шу)                   |  | 7  |

| SCHEDULE A (FEC Form 3X)  Use separate schedule(s) |   |                                    | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 121 / 123             |   |  |
|--|---|------------------------------------|-------------------------------------|---|---|--|
| 200 00   |   |                                    | or each category of the             | (check only one)                            |   |  |
| II LIVIIZED I ILOLIF I O                           |   | Detailed Summary Page              | X 11a 11b 11c 12<br>13 14 15 16 11  | _   |   |  |
| ۸۰   | winformation against from such Departs and St   | , not be cold or used by any nerge |                                     | _   |   |  |
| or   | ly information copied from such Reports and St<br>for commercial purposes, other than using the | name and add                       | dress of any political committee to | solicit contributions from such committee.  |   |  |
| $\setminus$  | NAME OF COMMITTEE (In Full)   |                                    |                                     |   | _ |  |
| $\rangle$  | BORDER HEALTH FEDERAL PAC   |                                    |                                     |   |   |  |
| Α.   | Full Name (Last, First, Middle Initial)<br>Patrick Wilcox                                       |                                    |                                     | Date of Receipt                             |   |  |
|  | Mailing Address 111 Rio Grande  |                                    |                                     | 05 11 7 2007                                |   |  |
|  | City  | State                              | Zip Code                            | Transaction ID: SA11A1.6556                 |   |  |
|  | mission   | TX                                 | 78572                               | Amount of Each Receipt this Period          |   |  |
|  | FEC ID number of contributing federal political committee.                                      | C                                  |                                     | 250.00                                      |   |  |
|  | Name of Employer selfemployed   | Occupation physician               |                                     | contribution                                |   |  |
|  | Receipt For:  |                                    | Year-to-Date ▼                      |   |   |  |
|  | Primary General   |                                    | 1050.00                             | 1   |   |  |
|  | Other (specify) ▼   |                                    | 1250.00                             |   |   |  |
| В.   | Full Name (Last, First, Middle Initial)<br>Patrick Wilcox                                       |                                    |                                     | Date of Receipt                             |   |  |
|  | Mailing Address 111 Rio Grande  | 06 15 2007                         |                                     |   |   |  |
|  | City  | State                              | Zip Code                            | Transaction ID: SA11A1.6682                 |   |  |
|  | mission   | TX                                 | 78572                               | Amount of Each Receipt this Period          |   |  |
|  | FEC ID number of contributing federal political committee.                                      | C                                  |                                     | 250.00                                      |   |  |
|  | Name of Employer selfemployed   | Occupation                         | n                                   | contribution                                |   |  |
|  | seirempioyea  | physiciar                          | 1                                   |   |   |  |
|  | Receipt For:  | Aggregate                          | e Year-to-Date ▼                    |   |   |  |
|  | Primary General   |                                    | 1500.00                             |   |   |  |
|  | Other (specify)   | 0 0                                |                                     |   |   |  |
| C.   | Full Name (Last, First, Middle Initial)<br>Subbarrao Yarra                                      |                                    |                                     | Date of Receipt                             |   |  |
|  | Mailing Address 6905<br>N. Cynthia  |                                    |                                     | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |   |  |
|  | City  | State                              | Zip Code                            | Transaction ID: SA11A1.6557                 |   |  |
|  | McAllen   | TX                                 | 78504                               | Amount of Each Receipt this Period          | _ |  |
|  | FEC ID number of contributing federal political committee.                                      | C                                  |                                     | 50.00                                       |   |  |
|  | Name of Employer<br>Self-employed   | Occupation physician               |                                     | contribution                                |   |  |
|  | Receipt For:  |                                    | e Year-to-Date ▼                    |   |   |  |
|  | Primary General   |                                    | 050.00                              | 1   |   |  |
|  | Other (specify) ▼   |                                    | 250.00                              |   |   |  |
| s  | UBTOTAL of Receipts This Page (optional)  | 550.00                             |                                     |   |   |  |
|  |   |                                    |                                     |   |   |  |
| T  | OTAL This Period (last page this line number of   | only)                              |                                     |   |   |  |

| SCHEDULE A (FEC Form 3X)  Use senarate schedule(s) |  |                                  | FOR LINE NUMBER: PAGE 122 / 123     |  |
|--|--|----------------------------------|-------------------------------------|--|
| ITEMIZED RECEIPTS or each category of the          |  |                                  | (check only one)                    |  |
|  |  |                                  | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17                                  |
| Δη   | winformation conied from such Benorts and St   | atemente may                     | y not be sold or used by any pers   |  |
| or   | y information copied from such Reports and St<br>for commercial purposes, other than using the   | name and add                     | lress of any political committee to | o solicit contributions from such committee.                             |
| $\setminus$  | NAME OF COMMITTEE (In Full)  |                                  |                                     |  |
|  | BORDER HEALTH FEDERAL PAC  |                                  |                                     |  |
| A.   | Full Name (Last, First, Middle Initial) Subbarrao Yarra  |                                  |                                     | Date of Receipt  |
| Mailing Address 6905<br>N. Cynthia                 |  |                                  |                                     | 06 15 2007   |
|  | City   | State                            | Zip Code                            | Transaction ID: SA11A1.6683  |
|  | McAllen  | TX                               | 78504                               | Amount of Each Receipt this Period                                       |
|  | FEC ID number of contributing federal political committee.   | C                                |                                     | 50.00  |
|  | Name of Employer<br>Self-employed  | Occupation physician             |                                     | contribution   |
|  | Receipt For:   | <u> </u>                         | Year-to-Date ▼                      |  |
|  | Primary General  |                                  | 200.00                              | 1  |
|  | Other (specify) ▼  | 0 0                              | 300.00                              |  |
| В.   | Full Name (Last, First, Middle Initial)<br>Hugo Zapata   |                                  |                                     | Date of Receipt  |
|  | Mailing Address 316 Xenops   |                                  |                                     | 04 12 7 2007   |
|  | City   | State                            | Zip Code                            | Transaction ID: SA11A1.6432  |
|  | mcallen  | TX                               | 78504                               | Amount of Each Receipt this Period                                       |
|  | FEC ID number of contributing federal political committee.   | С                                |                                     | 250.00 contribution  |
|  | Name of Employer selfemployed  | Occupation physician             |                                     | Contribution   |
|  | Receipt For:   | Aggregate                        | Year-to-Date ▼                      |  |
|  | Primary General Other (specify) ▼  | 0 0                              | 1000.00                             |  |
| _  |  |                                  |                                     |  |
| C.   | Full Name (Last, First, Middle Initial)<br>Hugo Zapata   |                                  |                                     | Date of Receipt  |
| C.   |  |                                  |                                     | Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y |
| C.   | Hugo Zapata Mailing Address 316 Xenops City  | State                            | Zip Code                            | M M / D D / Y Y Y Y  |
| C.   | Hugo Zapata Mailing Address 316 Xenops   | State<br>TX                      | Zip Code<br>78504                   | 0 5 1 1 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                |
| C.   | Hugo Zapata Mailing Address 316 Xenops City  |                                  | •                                   | Transaction ID: SA11A1.6558  Amount of Each Receipt this Period  250.00  |
| C.   | Hugo Zapata  Mailing Address 316 Xenops  City  mcallen  FEC ID number of contributing  | TX                               | 78504                               | Transaction ID: SA11A1.6558  Amount of Each Receipt this Period          |
| C.   | Hugo Zapata  Mailing Address 316 Xenops  City  mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:                  | C Occupation physician           | 78504                               | Transaction ID: SA11A1.6558  Amount of Each Receipt this Period  250.00  |
| C.   | Hugo Zapata  Mailing Address 316 Xenops  City  mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed                                | C Occupation physician           | 78504                               | Transaction ID: SA11A1.6558  Amount of Each Receipt this Period  250.00  |
|  | Hugo Zapata  Mailing Address 316 Xenops  City  mcallen  FEC ID number of contributing federal political committee.  Name of Employer selfemployed  Receipt For:  Primary General | C Occupation physician Aggregate | 78504  Year-to-Date ▼  1250.00      | Transaction ID: SA11A1.6558  Amount of Each Receipt this Period  250.00  |

## **SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 123 / 123 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BORDER HEALTH FEDERAL PAC Full Name (Last, First, Middle Initial) A. Hugo Zapata Date of Receipt Mailing Address 316 Xenops 06 15 2007 City Zip Code State Transaction ID: SA11A1.6684 mcallen TX 78504 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. contribution Name of Employer selfemployed Occupation physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify)

| SUBTOTAL of Receipts This Page (optional)           | <b>•</b> | 250.00   |
|---|----------|----------|
| TOTAL This Period (last page this line number only) | <b>•</b> | 79550.04 |